

METROPOLITAN ASYLUMS BOARD.

ANNUAL REPORT

FOR THE YEAR

1911.

PRICE 5/-

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METROPOLITAN ASYLUMS BOARD.

EMBANKMENT,

LONDON, E.C.,

July, 1912.

SIR,

I forward herewith a copy of the Board's Annual Report for the year 1911.

I should be glad to receive from you at any time a copy of any Report which you may consider would be of interest to the Board.

I am, Sir,

Your obedient Servant,

J. Duncombe Mann.

Clerk to the Board.

METROPOLITAN ASYLUMS BOARD.

Statistical items extracted from the Annual Reports on the work of the Metropolitan Asylums Board for the year 1911.

1. **Area** of district served by the Board, 121 square miles

Population estimated to middle of 1911, 4,521,301.

2. Number of institutions.

- (i.) 14 Hospitals for infectious diseases.
- (ii.) 4 Asylums for imbeciles.
- (iii.) Land Ambulance Service: 8 stations, with motor ambulances and other vehicles.
- (iv.) River Ambulance Service: 3 wharves and 5 steamboats.
- (v.) A Training Ship (with infirmary on shore).
- (vi.) 1 School for children with ringworm.
- (vii.) 2 Schools for children with ophthalmia.
- (viii.) 3 Seaside homes for children.
- (ix.) 5 Homes for defective children.
- (x.) 2 Hospitals for sick and convalescent children.
- (xi.) Central Stores.
- (xii.) Bacteriological Establishment.
- (xiii.) Office of Board.

—
TOTAL, 46

3. Infectious diseases.

			*Notifications.	†Admissions.		Death rates, 1911.
(i.)	Scarlet fever	...	10,483	...	8,818	1.9
(ii.)	Diphtheria	...	7,259	...	5,390	8.4
(iii.)	Enteric fever	...	1,022	...	360	14.3
(iv.)	Typhus fever	...	1	...	—	—
(v.)	Cerebro-spinal fever	...	101	...	5	40.0
(vi.)	Smallpox	...	72	...	70	15.7
(vii.)	Measles	...	—	...	3,144	13.9
(viii.)	Whooping cough	...	—	...	1,184	13.2

Average death-rates in Board's hospitals in quinquennial periods.

		1872-6	1877-81	1882-6	1887-91	1892-6	1897-1901	1902-6	1907-11
(i.)	Scarlet fever	...	12.4	12.6	10.7	8.3	5.5	3.5	3.1
(ii.)	Diphtheria	...	—	—	—	33.6	25.5	13.7	9.3
(iii.)	Enteric fever	...	18.6	20.0	17.5	15.3	17.5	15.6	14.6
(iv.)	Typhus fever	...	21.2	21.1	18.9	17.2	15.3	15.3	14.0
(v.)	Cerebro-spinal fever	...	—	—	—	—	—	—	—
(vi.)	Measles	...	—	—	—	—	—	—	—
(vii.)	Whooping cough	...	—	—	—	—	—	—	—

Rates in smallpox epidemics.

		1870-2	1876-8	1879-1883	1884-5	1893-4	1901-2
(viii.)	Smallpox	...	18.8	18.2	16.5	15.9	8.0
							16.8

* Metropolitan cases only.

† Including extra-metropolitan cases.

^a Cases not admitted until end of year 1910.

Staff, mortality rates amongst. (From infectious diseases only, calculated on number employed) :—

At fever hospitals	...	...	...	...	...	...	...	Nil.
At smallpox hospitals	...	...	...	...	...	...	...	Nil.

4. Ambulance work.

LAND SERVICE.—Infectious patients removed from home to hospital, 21,180 ; other infectious removals, 18,961. Conveyance of imbeciles and other persons, 9,042 ; total removals, 49,183. Mileage run by vehicles, 355,945.

RIVER SERVICE.—Patients conveyed down the river to the Board's hospitals, 61 ; other passengers conveyed to and from the hospitals, including staff, contractors' workmen, and recovered patients, 436 ; total passengers, 497. Miles run by steamboats, 4,673.

5. Asylums.

Patients admitted, 1,038 ; discharged or transferred to other institutions not under the Board, 127 ; died, 683 ; remaining, 7,270.

6. Children's Institutions.

Children admitted, 5,793 ; discharged, 5,030 ; died, 210 remaining, 3,216.

7. Training Ship Exmouth.

Boys admitted, 282 ; discharges to royal navy 105 ; to mercantile marine, 147 ; to army, 4 ; other discharges, 64 ; died, 2 ; remaining, 657.

8. Total number of persons in the various institutions on the last day of the year :—

Permanent staff	...	...	...	...	...	5,334
Temporary staff	...	...	...	...	...	301
Inmates	...	...	...	...	...	14,755
						<hr/>
Total	...	...	...	...	...	20,390
						<hr/>

9. General Expenditure for the year ended Michaelmas, 1911—£1,033,835 (£999,771).

SUBDIVISION of general expenditure—Asylums, £201,823 (194,373) ; hospitals, £302,458 (£329,520) ; ambulance services—land, £24,636 (£26,698) ; river £6,274 (£6,088) ; training ship, £20,024 (£19,318) ; children's homes and schools, £153,046 (£99,472) ; general expenses, £325,574 (£323,552).

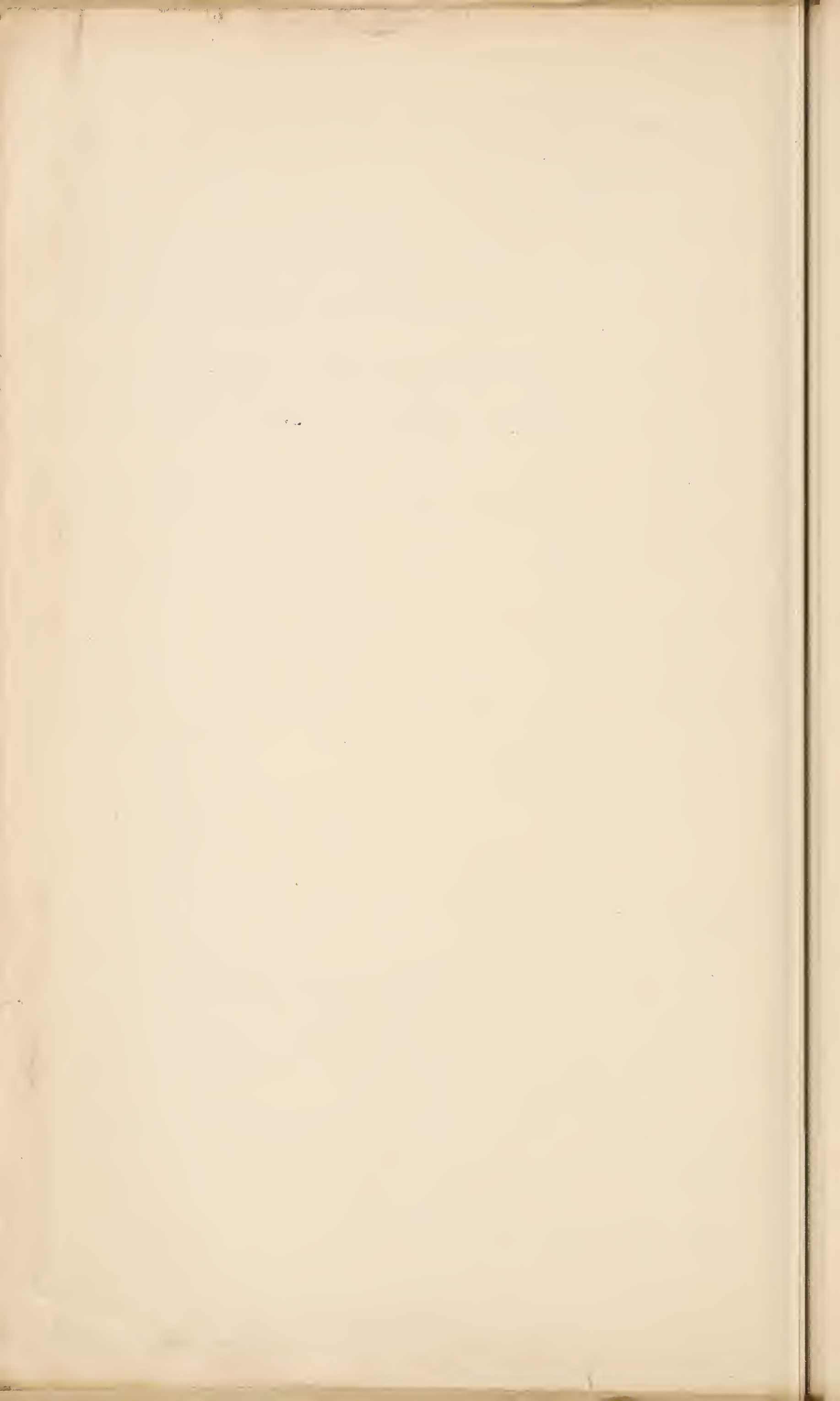
10. Loans.—Total amount borrowed to Michaelmas, 1911, £5,606,799 (£5,606,799) ; total amount owing, £2,451,364 (£2,645,491).

11. Capital outlay for land, buildings, fittings, and furniture, £5,904,136 (£5,879,868).

12. Acreage of Board's property, 1,450.

Office of the Board, Embankment, E.C.

July, 1912.





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METROPOLITAN ASYLUMS BOARD.

ANNUAL REPORT

FOR THE YEAR

1911.

(14th YEAR OF ISSUE.)

PRICE 5/-

PRINTERS—
BEN JOHNSON & CO., LTD., LONDON AND YORK.
1912.



BIBLIOGRAPHICAL NOTE.—Before the year 1886 no regular annual record of the work of the Board was published. (In the year 1871, however, and again in the years 1876 and 1877, the Chairman of the Board issued a report of the nature of an annual report, with some statistics). For the years between 1886 and 1897, both inclusive, the Chairman of the Board issued an annual report and the Statistical Committee also issued a report, each separately. These reports may, together, be taken as the reports of the Board for those years.

For the year 1898, and for subsequent years, an annual report of the Board, and so called, has been issued, consisting of a summary of the work of the Board for the year, the reports of the several standing committees, and the report of the Statistical Committee. The reports for the four years, 1898, 1899, 1900, and 1901 were issued in two volumes: vol. I. containing the report of the Board and the reports of the standing committees, except that of the Statistical Committee, which itself formed vol. II. The report for the year 1902 commenced a new series in one volume, bound in cloth and furnished with an index. The reports are sold to the public at 5s. a copy, in one volume or two as the case may be.

The separate reports of the Chairman of the Board above referred to and the first report of the Statistical Committee (1886) were of foolscap size; all the remainder are of the size of this volume.

In the report for 1888 a spot map showing smallpox admissions was included. In the report for 1889 spot maps showing admissions of all diseases to the Board's hospitals were included. In the report for 1890 were included spot maps of notifications also. In the reports for 1891 to 1902 spot maps of notifications but not of admissions were included. In the reports for 1903 to 1905, spot maps of notifications of smallpox and typhus cases only are included.

The following reports are nearly or wholly out of print:—The reports issued in 1871, 1876, and 1877. The report of the Statistical Committee for 1886. The report of the Board (two vols.) for 1900. (For this year—1900—however, all those parts of the report which referred to infectious diseases have been collected and separately printed, and copies may still be obtained. For the years 1899 and 1900 a somewhat similar collection was made as regards the imbecile asylums, and copies may still be obtained.)

From the years of the opening of the several institutions to 1885, annual reports of the medical superintendents, with statistics, and, in some cases, reports by the committees of management, were issued separately, and copies of many of them may still be had.

The annual reports of the Captain-Superintendent and Committee of the Training Ship Exmouth may be obtained in a separate form from 1877; the reports of the Children's Committee from 1898; the reports of the Ambulance Committee from 1884 to 1897; and the reports of the Finance Committee from 1900 to 1907.

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PREFATORY NOTE.

CONSTITUTION AND DUTIES OF THE METROPOLITAN ASYLUMS BOARD.

CONSTITUTION.

The Metropolitan Asylums Board was established by an Order of the Poor Law Board, dated 15th May, 1867, pursuant to the provisions of the Metropolitan Poor Act, 1867. This Act empowered the Poor Law Board to combine into districts the unions and parishes of the metropolis, as they should think fit, for the purpose of establishing "asylums" for the reception and relief of the sick, insane or infirm, or other class or classes of the poor, and to issue Orders controlling the action of the Managers of any such district. [30 & 31 Vict., c. 6.]

The Metropolitan Asylum District embraces all the unions and parishes in London and the Board deal with those matters which it is considered can best be transacted by a central authority for the whole of the metropolis rather than by each separate board of guardians acting locally. The Poor Law Board and their successors, the Local Government Board, have from time to time issued Orders for the direction and guidance of the Metropolitan Asylums Board.

The Board is composed of 73 members, 55 being elected by the metropolitan boards of guardians and 18 nominated by the Local Government Board.

DUTIES.

(i.) *Infectious Diseases.*

The first Order already referred to, dated 15th May, 1867, constituted the Board

for the reception and relief of the classes of poor persons chargeable to some union or parish in the said district respectively, who may be infected with, or suffering from, fever, or the disease of smallpox or may be insane.

The Diseases Prevention (London) Act, 1883, removed the civil disabilities which had till then been attached to admission into the Board's hospitals.

In 1888 the Board were authorised to admit diphtheria patients, and by the Poor Law Act, 1889, they were empowered to admit non-pauper cases of fever, diphtheria, and smallpox.

These provisions with regard to the removal and reception of fever and smallpox patients were subsequently incorporated in the Public Health (London) Act, 1891. [54 & 55 Vict., c. 76.]

By Order dated 18th February, 1911, the Local Government Board sanctioned the admission to any of the hospitals of poor children suffering from measles or whooping cough received through the metropolitan poor law authorities, while by a further Order, dated 30th May, 1911, and issued pursuant to the provisions of sec. 80, of the Public Health (London) Act, the Local Government Board sanctioned the admission, subject to certain restrictions, of non-pauper cases of measles.

The Local Government Board in July, 1912, intimated that sanction would be given to the admission of cases of puerperal fever.

Provision is made at the infectious hospitals for the instruction of medical students.

The Board receive from the several medical officers of health notifications of infectious disease occurring in the metropolis and publish information relating thereto.

(ii.) *Ambulance Service.*

By the Poor Law Act, 1879, superseded by sec. 79 of the Public Health (London) Act, 1891, the Board were empowered to provide an ambulance service for the removal of patients.

(iii.) The Mentally Defective.

The Local Government Board Order, dated 15th May, 1867, included the "insane" amongst the classes of poor for whose reception and relief the Board was constituted.

A further Order, dated 18th May, 1875, defined the persons to be admitted into the Board's imbecile asylums as

such harmless persons of the chronic or imbecile class as could be lawfully detained in the workhouse. No dangerous or curable persons such as would under the statutes in that behalf require to be sent to a lunatic asylum shall be admitted.

A Local Government Board Order, dated 2nd April, 1897, included feeble-minded children amongst the classes of poor persons to be received by the Board, and authority was subsequently given for the retention of these cases after 16 years of age. The provisions in this behalf are now incorporated in an Order dated 29th December, 1911, and called the Metropolitan Asylums (Mentally Defective Persons) Order, 1911, which defines the mentally defective persons to be received as

persons not certified as lunatics, who, by reason of mental defect, are incapable of receiving proper benefit from ordinary instruction, or cannot be properly trained in association with other persons in ordinary schools or institutions, or are incapable of using ordinary means or precautions for protecting themselves from injury or improper usage or treatment, or are incapable of maintaining themselves by work; provided that any such poor person on admission into an asylum belonging to the Metropolitan Asylum Managers shall not exceed 21 years of age.

(iv.) Children.

The provision of a training ship for the training of boys for sea service was sanctioned by the Local Government Board in 1875, under the terms of the Metropolitan Poor Amendment Act, 1869. [32 & 33 Vict., c. 63, s. 11.]

By Orders of the Local Government Board, dated 2nd April, 1897, and 11th September, 1908, the Board were constituted as the central metropolitan authority for dealing with various classes of poor law children, the sick and convalescent, those suffering from ophthalmia and ringworm and the mentally defective (see above). Under the first of these Orders the Board also provided for juvenile offenders from 1902 to 1910, when this branch of work was transferred to the County Council.

(v.) Casual Poor.

On the 10th November, 1911, the Local Government Board issued the Metropolitan Casual Paupers Order, 1911, forming a district conterminous with the existing Metropolitan Asylum District for the relief of the casual poor of the metropolis. The Order also provided under the Pauper Inmates' Discharge and Regulation Act, 1871, that the Managers of the Metropolitan Asylum District should be the Managers of the new district. Prior to the issue of this Order, every metropolitan board of guardians was required by the Metropolitan Houseless Poor Act, 1864, to provide casual wards for "destitute wayfarers and foundlings." [34 & 35 Vict., c. 108, s. 10. 27 & 28 Vict., c. 116, s. 5.]

As contemplated in the Casual Paupers Order the Local Government Board on the 28th March, 1912, issued the Metropolitan Casual Wards (Transfer) Order, 1912, transferring to the Managers on terms prescribed therein those of the Casual Wards provided under the Act quoted, which it was proposed to continue.

The effect of these two Orders was to centralise the control under the Board, from the 1st April, 1912, of twenty-four casual wards hitherto administered by the separate boards of guardians.

(vi.) Summary of Duties.

The work of the Board now includes the administration of the following institutions :—

Infectious diseases—fourteen hospitals for smallpox, scarlet fever, diphtheria, enteric fever, puerperal fever, typhus fever, measles and whooping cough (with arrangements for dealing with plague and cholera), and bacteriological establishments.

Accommodation, 8,150 patients, 3,000 staff.

Mentally defective—four asylums including infirmary for aged patients, two industrial colonies.

Accommodation, 8,329 patients, 1,530 staff.

Children—two hospitals for sick children, three seaside sanatoria and homes, one ringworm school, two ophthalmia schools, and one training ship.

Accommodation, 4,058 inmates, 1,050 staff.

Casual poor—twenty-four casual wards for homeless poor.

Accommodation, 1,758 inmates, 110 staff.

Ambulance service—eight ambulance stations, three riverside wharves, with motor and horse ambulances and ambulance steamers—150 staff.

Central stores—for reception of goods and their distribution to the various institutions.

The principal branches of the Board's work are conducted and controlled by the four central committees, the Hospitals, Asylums, Children's and Casual Wards carrying out the duties delegated to them by the Board. The other central services are similarly organised by the Finance, Contract, Works and Ambulance Committees, while the training ship Exmouth is managed by a smaller separate committee. The General Purposes Committee consider questions of general policy and principle; the Law and Parliamentary Committee deal with parliamentary and legal business affecting the services administered by the Board or touching its interests; and the Statistical Committee are responsible for the statistics and publications.

A general review for the year 1911 of questions affecting the Board and of the Board's work, with the annual reports of each of the Committees mentioned, together with statistics and a medical supplement, are published in this volume.

Office of the Board,
Embankment,
London, E.C.,
July, 1912.

METROPOLITAN ASYLUMS BOARD.

REPORT OF THE BOARD FOR THE YEAR 1911.

GENERAL REVIEW.

June, 1912.

1. The year 1911 has been marked by two events of considerable importance to the Board, one being the transfer of the casual poor in the metropolis to their care, and the other being the adoption of a new scheme for the accommodation and classification of the mentally defective.

The casual poor. 2. The problem of how best to deal with vagrancy has engaged the attention of legislators for more than three centuries and it is still very far from solution. In 1838 the Poor Law Commissioners issued a circular letter to boards of guardians in the metropolis calling attention to correspondence with the Commissioners of Police, and pointing out the duties of guardians in relieving the casually destitute, and they suggested the adoption of arrangements for securing the performance of a task of work. The subject continued to receive much attention in statutes, and in reports of the Poor Law Commissioners, and in 1864 the Select Committee on Poor Relief recommended that the relief of vagrancy in London should be a common charge, and this led to the passing of the Houseless Poor Acts of 1864 and 1865. Under the first Act every London board of guardians was required to provide casual wards to the satisfaction of the central authority, and the cost was made a central charge, which, in 1867, was made payable from the Metropolitan Common Poor Fund. Further enactments relating to the casual poor are found in the Pauper Inmates Discharge and Regulation Act, 1871, and the Casual Poor Act, 1882, and the existing regulations on the subject are contained in a General Order of the Local Government Board dated 18th December, 1882 (with some subsequent minor amendments) issued pursuant to the provisions of these two Acts.

**The Departmental
Committee on
Vagrancy.**

3. The latest enquiry on the subject was held in 1904-6 by a departmental committee of the Local Government Board, and the evidence given before that Committee established clearly to them the failure of the existing system, due largely to the inability to secure uniformity of administration which they considered an essential condition of success. The Committee recommended for the whole country that the control of the casual wards should be transferred to the police, and they thought that, if this plan were adopted for the country generally, there would be difficulties in the way of making a separate arrangement in London, though they gave the case of the metropolis special consideration.

**Metropolitan
Casual Paupers'
Order, 1911.**

4. No action was taken on this report until the autumn of 1911, when the Local Government Board decided to move in the matter by exercising the powers vested in them for the creation of districts by the Metropolitan Poor Act, 1867, and to centralise the management of the metropolitan casual wards. Accordingly, on the 10th November, they issued the Metropolitan Casual Paupers Order, 1911, forming a new district conterminous with the Metropolitan Asylum District for the relief of the casual poor, and constituting the Managers of the Asylum District the Managers of the new district. The same Order provided that the existing casual wards should be transferred from the guardians of the poor to the Board.

5. In a letter dated 13th November, forwarding this Order, the Local Government Board pointed out that, although the wards were subject to the same general regulations, considerable diversity of administration and treatment had been found to be unavoidable. They added that uniformity of administration was of the first importance, more especially as regarded the treatment of the habitual vagrant, and that in the Board's view such uniformity could only be secured by placing the casual wards in the metropolis under one authority.

The Local Government Board further indicated that it was most inadvisable that destitute persons should sleep out in the open or should wander about in the night, that it was one of the duties of the police to direct such persons to vagrant wards or shelters where they could find lodging, and that, when this Order was in force, the Metropolitan Asylums Board would be able to make more adequate arrangements than had hitherto been practicable to inform the police of the wards in which there was vacant accommodation, and thus to ensure destitute wanderers and wayfarers the provision of the food and shelter

of which they might be in need. The Local Government Board added that experience might make it possible to obtain some classification of casual paupers so as to differentiate the occasional from the habitual vagrant, and the irreclaimable from his fellows, and, with the co-operation of charitable societies and individual effort, to assist such as can be assisted and to reclaim some to a better way of life.

6. The Managers appointed a special committee to report to them as to the steps necessary to give effect to the Order, and this committee was engaged on this task at the close of the year.

The mentally defective.

7. The second prominent feature in the work of the Board during the year 1911 was the adoption of a complete scheme for the systematic classification and treatment of the whole of the mentally defective persons, of whatever grade, for whose care they are responsible. The Board have been charged from their formation with the duty of providing accommodation for such harmless persons "of the chronic or imbecile class as could be lawfully detained in a workhouse," and the control of the asylums for these cases has hitherto been the duty of the Asylums Committee of the Board. Since 1897 by an Order of the Local Government Board the Board have also been entrusted with the care of "children who by reason of defect of intellect . . . cannot be trained in association with children in ordinary schools" (but who have not been certified as imbeciles). These cases, with other classes of children, have been provided for in homes under the control of the Children's Committee. The reports made by that Committee to the Board from time to time as the result of their experience have prepared the way for the recognition of the facts that as a general rule these feeble-minded persons can never be sufficiently improved by the most careful training to take a place in the outside world, and that the community must undertake the burden of their permanent care, and, further, that there has been much overlapping between the cases classed as imbeciles and the feeble-minded, by what has often been the accidental circumstance of certification. The strongest evidence on this point is that of the Medical Superintendent of Darenth (Dr. Rotherham), who has also in the last few years been responsible for the mental side of the work of the Bridge Industrial Home for the feeble-minded. Dr. Rotherham has no doubt that there have been at Darenth numbers of inmates classed as improvable imbeciles quite up to the standard of the feeble-minded at Bridge Industrial Home, and some even beyond the standard of a large number at that Home.

8. Accordingly an important sub-committee of the General Purposes Committee consisting of the Chairman and Vice-Chairman of the Board, the past Chairmen of the Board, and the Chairmen of the chief standing committees, who in 1910 conducted an enquiry into the utilisation of the accommodation of the Board so far as the infectious hospitals service was concerned, and who, as set out in the annual report for that year, submitted many important recommendations on that subject, next turned their attention to the question of the accommodation available for mentally defectives, including under this term the whole of the cases, whether known as feeble-minded or imbeciles. The result of their deliberations is set forth in a lengthy report adopted by the Board on the 11th February, 1911.

The proposals. 9. The weighty evidence in favour of the conclusions arrived at is set out at length in the Committee's report in which it is shown that they are justified by experience, supported by the Report of the last Royal Commission on the care of the feeble-minded, and are regarded as satisfactory by the Lunacy Commissioners. The proposals received the sanction of the Local Government Board, and they will come into force early in 1912.

10. The recommendations on matters of principle involved the following important changes:—the transfer of the feeble-minded from the control of the Children's Committee to the Asylums Committee, thus bringing all grades of mentally defectives under the jurisdiction of one committee, and the transformation of the institution at Darenth into a colony, under the name of Darenth Industrial Colony, reserved entirely for improvable imbeciles, and for the feeble-minded drawn from the smaller homes which will in future be discontinued.

Darenth Industrial Colony. 11. With regard to the last-named change, which has given rise to some doubt in the minds of a few of those generally favourable to the rest of the scheme, there are some points which cannot be too strongly emphasised. The first is that every unimprovable imbecile, who merely requires housing and safekeeping, will be removed from Darenth and no new admissions of this class will be allowed there. In the next place the arrangement of the groups of buildings over a large site at Darenth lends itself to a thorough scheme of classification of the inmates to be provided for there in future, including the complete separation of the

persons who may be certified under the Lunacy Acts from cases not so certified. Thirdly, the type of buildings, the workshop accommodation, and the amenities of the site and surroundings render Darenth specially well suited for the purpose to which it is to be put.

12. The success which has attended the work at Darenth in the past, in spite of difficulties caused by the necessity for the retention of hopeless imbeciles (now to be removed) in some portion of the accommodation, is the best augury for the future of Darenth Industrial Colony. In this place the report of the Medico-Psychological Association of Great Britain and Ireland, a committee of which body recently made a thorough inspection of Darenth, may fittingly be quoted. The Committee state that they had

a noteworthy opportunity of seeing how far the study of pronounced mental deficiency can extend itself towards practicability in a visit to Darenth, the work at this Institution showing how really valuable results can be obtained from systematic and scientific arrangements of a training scheme . . . on the score of industry and cheerfulness at work the inmates at Darenth can set an example to all outside. Nothing struck the committee more than the eagerness to work with a smiling face. . . . The general conclusions of the Committee were that there is an amount of beneficial work done at Darenth that is not generally known, one might say suspected. If it were more in evidence there can be no doubt much scepticism and hopelessness now shown as to any possible good being done by special institutions would be swept away. . . . Darenth shows one way, and apparently the best, of lowering the cost, not by the profit that can be made on the work but by substituting happiness and ease of management for the reverse.

The Committee thought that

that instance alone should be of great assistance in solving the question of what should be done with the mental defectives.

**Feeble-minded
over 16.**

13. The Board also decided to ask the Local Government Board to enlarge their powers for providing for the feeble-minded by removing the restriction which under existing orders confines the admission of feeble-minded persons to children under 16 years of age, with the result that on the 29th December the Metropolitan Asylums (Mentally Defective Persons) Order, 1911, was issued. This Order authorised the admission of feeble-minded persons up to 21 years of age.

**Additional asylum
accommodation.**

14. The necessity of finding other accommodation for the unimprovable imbeciles to be removed from Darenth led eventually to the Managers deciding, as a temporary

measure, to utilise for this purpose the Fountain Hospital, which was not required for infectious cases. An increase in the normal accommodation of Darenth from 1,994 to 2,108 beds was approved, and the Asylums Committee were instructed to prepare a scheme for the further extension of the colony by having in readiness the plan of a suitable pavilion which could be erected and duplicated as required.

Asylum inmates. 15. The numbers of patients in the imbecile asylums for the year 1911 were as follow, viz. :—

		Increase or decrease on previous year.
Remaining on 1st January, 1911	7,042	+ 198
Discharged during the year ..	127	+ 6
Died	683	+ 89
Admitted	1,038	+ 125
Remaining on 31st December, 1911	7,270	+ 228

The number of patients admitted exceeded 1,000 for the first time since the year 1903 when Tooting Bec Asylum was opened, and when the admissions totalled 1,225. The average annual number of admissions during the last seven years has been 871. Of the patients admitted, 200 were under 16 years of age, 40 of these being under 5 years of age. 249 of the patients admitted (or nearly 30 per cent. of the adults) were over 70 years of age, 178 of these being between 70 and 80, 66 between 80 and 90, and 5 over 90.

16. A revised dietary scale for inmates in the asylums was introduced in April last. The Asylums Committee have received an interim report on the working of this scale, from which it appears that the scale has given great satisfaction to the inmates, while it also promises to effect considerable reduction in the cost of maintenance.

Children. 17. The numbers of the special classes of children received into hospitals, schools and homes under the control of the Children's Committee continue to increase, chiefly by reason of the development of the work of the hospitals for sick children. Some re-adjustment of these numbers will take place next year in consequence of the transfer, already referred to, of the feeble-minded cases from the control of the Children's Committee to that of the Asylums Committee.

The number of patients dealt with at the children's institutions are shown in the following table :—

	Remaining 1st January, 1911.	Admitted during 1911.	Discharged during 1911.	Died.	Remaining 31st December, 1911.	Increase or decrease on previous year.
Sick & convalescent :						
Inland	1,032	3,372	2,601	292	1,611	+ 579
Seaside	385	850	839	13	383	— 2
Ringworm	303	705	829	1	178	—125
Ophthalmia	612	620	550	2	680	+ 68
Mentally defectives	331	92	59	...	364	+ 33
Total ...	2,663	5,639	4,878	308	3,216	+ 553

18. Notwithstanding the fact that the number of children requiring treatment for ringworm has increased, the period of stay in the special school for this class has been so diminished since the introduction of X-ray treatment that the Children's Committee have considered what use could best be made of that part of the accommodation of the school which did not appear to be required for ringworm cases, and the Board decided on the Committee's recommendation to use it for the time being for convalescent children drawn mainly from the two children's hospitals.

Other details of the work relating to the classes of children provided for will be found in the report of the Children's Committee and the reports of the medical officers appended to it.

Training Ship, Exmouth. 19. During the year 282 boys were admitted to the Training Ship Exmouth, 320 were discharged, and 2 died. 657 remained under training at the end of the year, a decrease of 40 on the previous year. Of the boys discharged 105 entered the Royal Navy and 147 entered the Mercantile Marine.

20. Visits to the ship were made by 470 members of the Central Poor Law Conference in February, and by 200 members of metropolitan boards of guardians in June. In both cases the visitors expressed through their representatives complete satisfaction with the condition of the ship and the appearance and training of the boys.

21. The question of the provision of a sea-going tender was still under consideration at the end of the year, but it is anticipated that a decision as to the course to be adopted will be reached in the near future.

Infectious hospitals.

22. The following statistics relate to the patients in the infectious hospitals during the year 1911, viz. :—

	Admissions.	Discharges.	Deaths.	Mortality per cent.
Scarlet fever	8,818 (+36)	8,273 (—1,250)	167 (—46)	1·94
Diphtheria	5,034 (+1,400)	4,161 (+897)	428 (+147)	8·90
Diphtheria (Bacteriological) ..	356 (+134)	330 (+111)	7 (+5)	2·02
Enteric fever	360 (—149)	341 (—49)	54 (—23)	14·30
Typhus fever	—	—	—	—
Cerebro-spinal fever ..	5 (+1)	3 (+1)	2 (same)	40·00
Measles	3,144 (+2,847)	2,723 (+2,577)	438 (+400)	13·89
Whooping cough ..	1,184 (+1,120)	847 (+823)	144 (+143)	13·24
Other diseases ..	2,237 (+514)	2,100 (—443)	123 (+136)	5·51
Total	21,138 (+5,900)	18,778 (+3,550)	1,363 (+662)	6·12
Smallpox	70 (+65)	59 (+55)	11 (+11)	15·7

NOTE.—The figures in brackets represent the increase or decrease on the numbers for the previous year.

23. It will be observed that the number of cases admitted shows an increase of 5,900 on the admission for 1910, due to the large increase in the admissions of measles and whooping cough consequent upon the arrangements for the treatment of these diseases in the hospitals being brought into full operation during the year under review, and also to an increase in the number of diphtheria admissions, the maximum number of cases of the last-named disease under treatment being the highest recorded during the last ten years. The average annual number of admissions since 1891 has been approximately 22,000.

The lowest number of patients under treatment on any day was 2,495 on the 2nd September, and the highest, 3,890 on the 14th November. The average of the corresponding figures for sixteen years past is 2,916 and 4,476 respectively.

24. The success of the scheme for the treatment of cases of measles and whooping cough has been sufficiently demonstrated during the year, and the Hospitals Committee came to the conclusion that these diseases had so established their claim upon a portion of the infectious hospital accommodation that a scheme was settled by which, in the event of a well-marked seasonal rise in the numbers of scarlet fever and diphtheria patients, a number of beds is to be reserved for measles and whooping cough if required for these diseases. The Board approved in principle the provision of separate receiving rooms for measles at the four hospitals where there was no existing accommodation for the purpose.

25. A small outbreak of smallpox originating in an East End institution occurred early in the year, but the number of cases was limited to 70. The last serious epidemic of smallpox occurred in 1901-2, and 7,916 admissions were recorded in 1902. The last year in which the admissions were over 60 was in 1904, when 449 cases were under treatment. It is satisfactory to note that the metropolis has been so free from this disease since the year mentioned, but in view of the extraordinary rapidity with which smallpox may spread, the large number of cases with which a hospital authority has often been required to cope in a space of time so short that it would be impossible to organise in it the necessary hospital nursing and removal arrangements unless a substantial nucleus was in existence, the Board would be failing in their duty unless they maintained a reserve smallpox service in readiness to work at a moment's notice. The cost of this service must be regarded as an insurance in the interests of the community.

**Ambulance
service.**

26. The total number of cases removed by the Board's ambulances during 1911 was 49,183, compared with 37,240 in 1910. Of this number 21,180 were cases removed to the infectious hospitals and 686 were infectious cases removed to other places. 111 patients and 386 visitors were conveyed to Long Reach by the River Ambulance Service. The facilities afforded by the Board for the hire of non-infectious ambulances were employed in 2,279 mental, medical and surgical cases. The public have made a greater use of the Board's ambulances for the conveyance of accident and non-infectious cases than in any previous year. At the request of the Commissioner of Police a number of motor ambulances was lent for use on the routes of the royal processions at His Majesty's Coronation and proved of considerable service.

27. The total number of ambulance journeys in the year amounted to 28,506, and the miles run to 355,945. Motor ambulances under the control of the Ambulance Committee have been supplied to Queen Mary's Hospital and Darenth Asylum for the ordinary work of these institutions.

28. The substitution of motor for horse traction at the ambulance stations is nearly complete. This change has been completed at the Eastern, Western, South-Eastern and Mead Stations, and is in progress at the North-Western and Brook Stations.

Finance. 29. During the financial year ended at Michaelmas, 1911, the net expenditure of the Board met out of the rates was £997,546, representing a rate of 5·37d. in the pound. The rate compares with an average of nearly 6d. for the previous ten years and, with the exception of 1901 and 1910, has not been so low since 1899, when the work was much less. The average daily number of persons maintained in the Board's institutions during the year was 13,401.

The corresponding figures for the previous four years were :—

Net Expenditure.						Average number of persons maintained.
					Rate.	
Amount.					in the £ d.	
1907	..	..	1,067,224	5.88	13,127
1908	..	..	1,088,296	5.93	13,612
1909	..	..	1,045,092	5.63	13,687
1910	..	..	965,802	5.17	12,792

30. The total expenditure was made up of the following items :—

	Total.	Increase or decrease on previous year.
	£	£
Hospitals and ambulance service ..	333,368	— 28,938
Asylums	201,823	+ 7,450
Children	173,070	+ 54,280
Repayment of, and interest on, loans and general expenses	325,574	+ 1,272
Total	1,033,835	+ 34,064
Less receipts	36,289	+ 2,320
Net total	£997,546	+ £31,744

31. For the fifth consecutive year no money has been raised on loan. Since 1868, when the Board contracted their first loan, over £5,600,000 has been borrowed for various purposes. The outstanding indebtedness has been further reduced during the financial year by £194,127 and at Michaelmas, 1911, amounted to £2,451,364. The total reduction since 1906 has been £964,634, and in all £3,155,435 or 56 per cent. of the total amount borrowed has been repaid. The outstanding debt is at the rate of 10s. 10d. per head of the population of London, compared with 11s. ten years ago, notwithstanding the large capital outlay on accommodation, the number of beds provided having risen from 14,000 to over 20,000. Under existing arrangements all loans will be entirely repaid in ten years' time.

32. The average daily cost on all inmates for maintenance is 6½d. per day, fractionally less than last year, compared with 8½d. ten years ago. The total maintenance cost was £125,828 for 13,400 inmates compared with £135,083 for 10,595 inmates in 1901.

33. Among other items of expenditure that on printing and stationery supplies deserves special mention. As the result in large measure of centralisation of ordering and supervision, and of improved methods, the total expenditure on these supplies, which in 1897 amounted to £11,232 for 24 institutions, has been reduced last year to £4,560 for some 40 establishments.

Contracts. 34. The Contract Committee in 1911 dealt with some 600 contracts representing an expenditure of £270,500, of which provisions accounted for £155,000 and goods received at the Board's central stores £37,000. The approximate value of the coal and coke contracts for the year amounted to £60,000.

Works. 35. Under the control of the Works Committee, the department of the Engineer-in-Chief has carried out works amounting in value to about £75,000. Rather more than one-half of this amount represents building and the remainder engineering works. Contracts amounted to approximately £50,000 and works carried out by direct labour to £7,500, the remainder of the total expenditure under the Engineer-in-Chief's department being the estimated cost of works carried out by the staffs of the various institutions.

Staff. 36. The total number of officers and servants employed by the Board on the 31st December, 1911, was as follows:—

	Permanent.	Increase or decrease on previous year.	Temporary.	Increase or decrease on previous year.
Head office.. ..	117	— 6	10	—
Asylums	1,332	— 20	56	+ 10
Children's institutions ..	1,067	+139	74	+ 32
Training ship Exmouth ..	52	— 2	7	+ 4
Fever hospitals*	2,510	+177	131	+ 97
Smallpox hospitals (in- cluding ambulance service)	114	+ 5	15	— 2
Land ambulance service ..	131	+ 1	7	+ 2
Central stores	11	— 1	1	+ 1
	5,334	+293	301	+144

* Including Bacteriological Laboratories.

During the year 2,129 officers and servants were appointed, and 1,836 left the service, showing an increase of 293. The officers superannuated numbered 17.

National Insurance Act. 37. The problem of the working of the National Insurance Act, 1911, so far as it concerns the large staff employed by the Board and the further important question of what part the Board may be enabled to take in the provision of sanatorium benefits under the Act will demand attention early in 1912.

Board of Management. 38. The Board received with regret intelligence of the death, after a prolonged illness, of Mr. Arthur Monckton, who represented the City of London Union since 1905, and who was Vice-Chairman of the Contract Committee. The death has also to be recorded with regret of Mr. Joseph Lower, a representative of the Wandsworth Union since 1904, and of Mr. Abel Simner, a representative of the St. George's Union since 1909.

The retirement, on account of ill-health, of an old and valued member of the Board, Mr. J. H. Lile, J.P., took place in July, 1911: Mr. Lile represented the City of London Union since 1897, and besides occupying the chair of the General Purposes Committee, had taken an active interest in the work of the Board.

The Wandsworth Guardians elected Mr. G. J. Fowle in place of Mr. Lower; the City of London Guardians Mr. Benjamin Turner in place of Mr. Lile; and the St. George's Guardians Mr. William Smith in place of Mr. Simner.

39. In May, 1911, Mr. Walter Dennis was re-elected Chairman, and Professor William R. Smith, J.P., D.L., M.D., was re-elected Vice-Chairman of the Board for a further term of twelve months.

40. A list of members of the Board, showing the Committees on which each was serving at the close of the year, and a statement showing the location, acreage, date of opening and accommodation of the several institutions under the Board's control, are appended.

(Signed) WALTER DENNIS,
Chairman of the Board.

(Signed) T. DUNCOMBE MANN,
Clerk to the Board.

OFFICE OF THE BOARD,
EMBANKMENT,
LONDON, E.C.

APPENDIX I.

LIST OF MEMBERS OF THE BOARD,
SHOWING THE COMMITTEES ON WHICH EACH WAS SERVING
AT THE CLOSE OF THE YEAR, 1911.

MANAGERS ELECTED BY THE SEVERAL METROPOLITAN BOARDS OF
GUARDIANS.

UNION OR PARISH.	NAME OF MANAGER.	ADDRESS.	COMMITTEES (AS AT END OF 1911).
Bermondsey .. Bethnal Green	Ecroyd, W. H. Eickloff, Walter	10, Burghill Road, Sydenham .. "Clovelly," Devonshire Road, Forest Hill, S.E.	Works, Contract, Casual Poor. Hospitals, Children's, Casual Poor.
Bloomsbury ..	Smith, Prof. William R., J.P., D.L., M.D. (<i>Vice-Chairman of the Board</i>)	74, Great Russell Street, Bloomsbury, W.C.	<i>Ex-Officio Member of all Committees.</i>
Camberwell .. ,,	Brown, Richard Bousfield, E. C., L.R.C.P., M.R.C.S., D.P.H.	32, East Dulwich Road, S.E. .. 6, De Crespigny Park, Denmark Hill, S.E.	Asylums, Children's, Contract. Hospitals, Statistical.
Chelsea ..	Crosse, T. Warren	10, Cresswell Gardens, South Kensing- ton, S.W.	Children's, Ambulance.
City of London ,,	Benson, Charles J. Doughty, Rev. G. Bell	18, Camomile St., E.C. 27, Westbourne Gardens	Hospitals, "Exmouth." Hospitals, Children's, "Ex- mouth."
,, ,, ,,	Turner, Benjamin Wilkinson, Cuthbert (<i>One Vacancy</i>)	213, Lordship Road, Stoke Newington 2, Mitre Court, Fleet Street, E.C. ..	Hospitals. Statistical.
Fulham ..	Botterill, Charles	St. Botolph's, Fulham Palace Road, Fulham, S.W.	Hospitals, Asylums, Works.
Greenwich ..	Oldman, F. J.	85, Arbuthnot Road, New Cross, S.E.	Asylums, Children's, Works, Contract.
Hackney .. ,,	Bates, Thomas Beurle, W. L.	67, Clifden Road, Lower Clapton, N.E. Linden House, 331, Victoria Park Road, N.E.	Hospitals, Children's. Hospitals, Children's.
Hammersmith	Seager, Osmund	3, Girdler's Road, W. Kensington, W.	Finance, Asylums, Children's, Ambulance, "Exmouth."
Hampstead ..	Sheffield, Col. Frank	"Palaspai," Daleham Gardens, Hamp- stead, N.W.	Hospitals, Asylums.
Holborn .. ,,	Baker, Miss I. M. Garritty, Edward	37, Brooke Street, Holborn, E.C. .. Accrington House, 37, Hall Street, Goswell Road, E.C.	Hospitals, Children's. Hospitals, Works.
Islington .. ,, ,,	Elliott, G. S. Lambert, Samuel, J.P. Walkley, Alfred	14, Upper Street, Islington, N. .. 125, Barnsbury Road, N. Tower House, 17, Cromartie Road, Hornsey Rise, N.	Children's. Hospitals, Asylums, "Ex- mouth," Contract. Asylums, Children's, Works.
Kensington .. ,, ,,	Fleming, Sir Francis, K.C.M.G. Webb, Colonel R. F., J.P., D.L. Wilde, Miss M. J.	9, Sydney Place, South Kensington, S.W. 6, West Cromwell Road, South Kensington, S.W. 84, Lexham Gardens, W.	Asylums, Children's, Statistical. Finance, Asylums. Asylums, Children's, Casual Poor.
Lambeth .. ,, ,,	Clark, Arthur Gough-Cook, William Hawkey, J. F.	Lynton, Crane's Park, Surbiton .. 26, Herne Hill, S.E. 75, Arlingford Road, Tulse Hill, S.W.	Asylums, Children's, Works. Children's, Works. Hospitals, Works.
Lewisham .. Mile End Old Town ..	Bevan, W. G. Boustred, G. R.	10, Sydenham Road, Sydenham, S.E. 83, Clark Street, Stepney, E. ..	Hospitals, Children's. Asylums, "Exmouth."
Paddington .. ,, ,, ,, ,,	Cole, S. J. Graham, Henry Moore, W. B. Heilbuth, G. H. Luttman-Johnson, Henry	"Fernleigh," 123, Fernhead Road, W. 182, Fernhead Road, W. 89, Malmesbury Road, Bow, E. .. 15, Walbrook, E.C. 17, Rutland Gate, S.W.	Hospitals, "Exmouth." Hospitals, Children's. Asylums, "Exmouth." Statistical. Finance, Hospitals, Asylums.
St. George's .. ,, ,, ,,	Smith, William Walden, R. W., J.P.	88, Cambridge Street, S.W. "Bella Vista," Upper Warlingham ..	Hospitals, Children's. Asylums, Children's, Statistical. Contract, Casual Poor.
St. George's-in- the-East .. St. Marylebone ,,	Gibbs, John Browne, Elliott S., L.R.C.S.I., L.R.C.P.I. Dennis, Walter (<i>Chairman of the Board</i>)	229 and 231, Cable Street, E. .. 5, Cavendish Mansions, Langham Street, W. Infield House, Carshalton, Surrey ..	Hospitals, Children's, Contract Statistical. <i>Ex-Officio Member of all Committees.</i>
St. Pancras .. ,, ,, ,, Shoreditch	White, Edward, J.P. Boden, Anthony Rendel, Miss E. M. Wetenhall, W. J., J.P. Hinton, W. E.	20, Upper Berkeley Street, W. .. "Bonsall," Holden Road, North Finchley, N. 23, Russell Square, W.C. 8, Maitland Park Villas, N.W. .. "Belvedere," Shepherd's Hill, High- gate, N.	Hospitals, Asylums, Contract Works. Hospitals, Children's. Asylums, Children's. Asylums, Children's.

LIST OF MEMBERS OF THE BOARD.

UNION OR PARISH.	NAME OF MANAGER.	ADDRESS.	COMMITTEES (AS AT END OF 1911).
Southwark ..	Cornell, Thomas (<i>Chairman, General Purposes Committee</i>)	"Ingleside," 32, Dornton Road, Balham, S.W.	Finance, Contract, "Exmouth," Works (<i>Ex-Officio Member, Hospitals, Asylums, Children's</i>).
,, ..	Devereux, J. O.	20, Nelson Square, Blackfriars Road, S.E.	Asylums, Children's, Contract.
Stepney ..	Higley, Rev. F. H.	636, Commercial Road East, E. ..	Children's, "Exmouth."
Strand ..	Hillersdon, Rev. F. Harcourt	20, Taviton Street, Gordon Square, W.C.	Finance, Statistical.
Wandsworth ..	Fowle, G. J.	67, Erpingham Road, Putney, S.W.	Hospitals, Asylums.
,, ..	Penfold, William F.	Burwood House, Upper Tooting, S.W.	Finance, Asylums, Children's.
,, ..	Sullivan, Alfred	3, St. Nicholas Road, Balham, S.W.	Asylums, Children's, Am'lance.
Westminster ..	Thomson, H. Lyon	34, St. James's Street, S.W.	Ambulance, Works.
Whitechapel ..	Bailey, William	Harefield, Romford, Essex	Hospitals, Children's.
Woolwich ..	Graham, Lieut.-Col. W. J. B., V.D.	"Whitehouse Villa," Woodlands, Old Charlton, Kent	Asylums, Contract, Works.

MANAGERS NOMINATED BY THE LOCAL GOVERNMENT BOARD.

NAME OF MANAGER.	ADDRESS.	COMMITTEES (AS AT END OF 1911).
Doneraile, The Viscount ..	91, Victoria Street, Westminster, S.W. ..	Ambulance, Statistical.
Drage, Geoffrey	29, Cadogan Square, S.W.	"Exmouth," Contract.
Gell, H. W., M.B.	24, Palace Court, Bayswater, W.	Asylums, Ambulance, Casual Poor.
Goldie, Colonel J.	105, Philbeach Gardens, Kensington, S.W.	Hospitals, Asylums, Ambulance, "Exmouth."
Helby, J. T.	"Glengarriff," Cobham, Surrey	Finance, Hospitals, Asylums, Contract, Works, Casual Poor.
Henderson, Admiral W. H.	12, Vicarage Gardens, Kensington	Hospitals, Ambulance, "Exmouth," Contract.
Hensley, Sir Robert M., J.P.	"Armidale," 309, Up Richmond Road, Putney, S.W.	Finance.
Hunt, Jackson, J.P.	23, Montagu Square, W.	Finance, Hospitals, Ambulance, Casual Poor,
Inderwick, Miss E. F. ..	8, Warwick Square, S.W.	Hospitals, Statistical.
Meinertzhagen, E. L., J.P. ..	4, Cheyne Walk, Chelsea, S.W.	Hospitals, Statistical.
Nepean, Captain St. Vincent, M.V.O., R.N.	11, Kensington Crescent, W.	Children's, Asylums, Ambulance.
Portman, Berkeley	38, Hurlingham Court, S.W.	Finance, Ambulance, Contract.
Ritchie, Gerald	39, Cheyne Walk, Chelsea, S.W.	Hospitals, Children's.
Scovell, Sir Augustus C., J.P.	8, Primrose Mansions, Battersea Park, S.W.	Finance, Hospitals, Ambulance, Statistical, Works.
Simpson, E. Palgrave	5, Durham Villas, Phillimore Gardens, W.	Works, Children's.
Spender, Harold	47, Campden House Court, Campden Hill, W.	Hospitals.
Sprankling, Rev. Canon ..	St. George's Cathedral House, Southwark, S.E.	Hospitals, Children's, Statistical, Works Contract.
Stanley, Hon. Maude A. ..	32, Smith Square, Westminster, S.W. ..	Children's.

No.	Name of institution.					Where situated.				
Imbecile Asylums.										
1	Tooting Bec Asylum and Children's Re-					Tooting, S.W.				
	ceiving Home									
2	Leavesden Asylum					King's Langley, Herts.				
3	Caterham					Caterham, Surrey				
4	Darenth Training School and Industrial Colony					Dartford, Kent				
Fever Hospitals.										
5	Eastern Hospital					Homerton Grove, N.E.				
6	North-Eastern Hospital					S. Ann's Road, South Tottenham, N.				
7	North-Western					Lawn Road, Hampstead, N.W.				
8	Western					Seagrave Road, Fulham, S.W.				
9	South-Western					Landor Road, Stockwell, S.W.				
10	*Fountain					Tooting Grove, Tooting Graveney, S.W.				
11	Grove					Tooting Grove, Tooting Graveney, S.W.				
12	South-Eastern					Avonley Road, New Cross, S.E.				
13	Brook					Shooters Hill, Kent				
14	Northern					(for Convalescing Patients.)				
15 {	Southern Upper					(")				
	,, Lower					(")				
Smallpox Hospitals.										
16	Joyce Green Hospital					Dartford, Kent				
17	Orchard Hospital					,, ,				
18	Long Reach Hospital					,, ,				
19 {	Training Ship " Exmouth " †					Moored off Grays, Essex				
	Infirmary					Grays, Essex				
Homes and Schools for Children.										
<i>Sick and Convalescent, Inland</i>										
20	Queen Mary's Hospital for Children					Carshalton, Surrey				
21	Park Hospital for Children					Hither Green, Lewisham, S.E.				
<i>Sick and Convalescent, Seaside.</i>										
22	S. Anne's Home					Herne Bay, Kent				
23	East Cliff House					Margate, Kent				
24	Millfield					Rustington, near Littlehampton				
25 {	The Downs School (part of)					Sutton, Surrey				
	Ringworm School.									
	The Downs School (part of)									
<i>Ophthalmia Schools.</i>										
26	White Oak School					Swanley Junction, Kent				
27	High Wood					Brentwood, Essex				
<i>Homes for Defectives.</i>										
28 {	Lloyd House					11, Lloyd Street, Pentonville, W.C.				
	12, Lloyd Street									
29	26, Elm Grove					Pentonville, W.C.				
30	81, Earlsfield Road					Peckham, S.E.				
31	Surrey House, 66, S. Ann's Hill					Wandsworth, S.W.				
32	Bridge Industrial Home					,, ,				
Ambulance Stations.										
33	Eastern Ambulance Station					Brooksby's Walk, Homerton, N.E.				
34	North-Western					Lawn Road, Hampstead, N.W.				
35	Western					Seagrave Road, Fulham, S.W.				
36	South-Western					Landor Road, Stockwell, S.W.				
37	South-Eastern					New Cross Road, S.E.				
38	Brook					Shooters Hill, Kent				
39	Tooting Bec					Tooting, S.W.				
40	Mead					(Motor Workshop) Carnwath Road, Fulham, S.W.				
Wharves, Piers, and Steamers.										
41	North Wharf					Managers' Street, Blackwall, E.				
42	South					Trinity Street, Rotherhithe, S.E.				
43	West					Carnwath Road, Fulham, S.W.				
—	Five Ambulance Steamers . . . . .					. . . . .
Contract Department.										
44	Central Stores					Soloman's Passage, Peckham Rye, S.E.				
45	Bacteriological Establishments					Sutton, Surrey				

* During period to which this report relates the Fountain Hospital was lent for the accommodation of
† The present Training Ship, Exmouth, was built for the Board in 1905.

under the Board's control.

No.	Date of opening.				Acreage.				Accommodation.			
1	January 19th, 1903	..	..	..	22 a.	..	..	..	1,114	beds.		
2	October, 1870	..	..	..	143 a.	2 r.	..	..	2,164	„		
3	„	„	..	..	154 a.	1 r. 32 p.	..	..	2,109	„		
4	November, 1878	..	..	..	164 a.	1 r. 0 p.	..	..	2,108	„		
5	February 1st, 1871	..	..	..	9 a.	..	..	..	382	„		
6	October 8th, 1892	..	..	..	33 a.	0 r. 6 p.	..	..	623	„		
7	January 25th, 1870	..	..	..	12 a.	0 r. 1 p.	..	..	474	„		
8	March 10th, 1877	..	..	..	13 a.	2 r. 35 p.	..	..	452	„		
9	January 31st, 1871	..	..	..	8 a.	1 r. 20 p.	..	..	339	„		
10	October, 1893	..	..	..	10 a.	2 r. 19 p.	..	..	405	„		
11	August 17th, 1899	..	..	..	22 a.	3 r. 3 p.	..	..	518	„		
12	March 17th, 1877	..	..	..	10 a.	2 r. 0 p.	..	..	498	„		
13	August 31st, 1896	..	..	..	29 a.	1 r. 2 p.	..	..	568	„		
14	September 25th, 1887	..	..	..	35 a.	2 r. 38 p.	..	..	738	„		
15 {	October, 1890	..	..	..	160 a.	0 r. 16 p.	..	..	921	„		
	Erected 1902	..	..	..					610	„		
16	December 28th, 1903	..	..	..	254 a.	1 r. 18 p.	..	..	940	„		
17	Erected spring, 1902	..	..	..	63 a.	0 r. 18 p.	..	..	800	„		
18	February 27th, 1902	..	..	..	24 a.	0 r. 37 p.	..	..	300	„		
19 {	March, 1876	..	..	..	6 a.	2 r. 13 p.	..	..	700	boys.		
	August, 1905	..	..	..					34	beds.		
20	January 29th, 1909	..	..	..	136 a.	0 r. 0 p.	..	..	850	„		
21	November 8th, 1897	..	..	..	19 a.	1 r. 6 p.	..	..	800	„		
22	December 26th, 1897	..	..	..	2 a.	3 r. 0 p.	..	..	134	„		
23	June 26th, 1898	..	..	..	3 a.	2 r. 20 p.	..	..	130	„		
24	April 6th, 1904	..	..	..	5 a.	2 r. 0 p.	..	..	120	„		
25	February 26th, 1903	..	..	..	19 a.	1 r. 24 p.	..	..	420	children.		
26	March 20th, 1903	..	..	..	49 a.	2 r. 10 p.	..	..	360	„		
27	July 26th, 1904	..	..	..	28 a.	..	..	..	360	„		
28 {	January 16th, 1899	..	..	..	..	..	..	..	20	girls.		
	October 18th, 1901	..	..	..	..	..	..	..	8	„		
29	January 25th, 1901	..	..	..	..	..	..	..	15	boys.		
30	July 7th, 1903	..	..	..	..	..	..	..	10	girls.		
31	December 11th, 1903	..	..	..	..	..	..	..	20	boys.		
32	February 12th, 1901	..	..	..	7 a.	1 r. 0 p.	..	..	210	„		
33	June 20th, 1885	..	..	..					
34	September 1st, 1897	..	..	..					
35	July 9th, 1884	..	..	..	The areas of these sites are included in those of the adjoining hospitals (see above).							
36	May 2nd, 1898	..	..	..					
37	October 1st, 1883	..	..	..					
38	August 18th, 1896	..	..	..					
39	Erected 1903	..	..	..	Included in site of asylum On part of the West Wharf site							
40	April, 1902	..	..	..					
41	Purchased November, 1883	..	..	..	—	2 r. 0 p.	..	..	9	beds.		
42	„ September, 1883	..	..	..	2 a.	1 r. 0 p.	..	..	24	„		
43	„ January, 1885	..	..	..	2 a.	2 r. 10 p.	..	..	..	..
—	October, 1884, to March, 1902	..	..	..	..	..	..	..	About 170 beds.			
44	September, 1908	..	..	..	..	..	..	..	..	..
45	May, 1907	..	..	..	2 a.	2 r. 0 p.	..	..	..	..

defective girls, transferred from High Wood School.

ANNUAL REPORT OF THE HOSPITALS COMMITTEE FOR 1911.

Chairman and Vice-chairman. 1. We elected the Rev. Canon Sprankling and Dr. Elliott Browne to be our chairman and vice-chairman respectively for a second year.

Meetings. 2. We held 21 meetings, while our sub-committees (central, institution and special) met on 284 occasions.

Staff. 3. (a) *Principal officers.*—The only change in the personnel of the principal officers was the retirement, on reaching the age limit, of the Rev. H. J. E. Barter from the chaplaincy of the North Eastern Hospital, after 14 years' service.

The proposal that future appointments of chaplains should be subject to annual re-election being still before the Local Government Board, we arranged for the duties at the North Eastern Hospital to be temporarily performed by the Rev. E. W. Yates, vicar of St. Paul's, Tottenham.

(b) *Assistant medical officers.* 7 assistant medical officers resigned and 6 were appointed. 21 medical officers were employed temporarily at various times.

(c) *Nursing staff.* The nursing staff scheme submitted to the Board in April, 1910, of which we gave an epitome in our last report, came into force on 26th January, 1911. The full effect of the scheme cannot of course be ascertained until it has been longer in operation, but we hope that the endeavours which have been made to ensure that all nurses appointed since the latter date possess the requisite qualifications will lead to its ultimate success.

The arrangements to be made for the examination of probationers who enter for two years' training and of nurses who enter for a twelve months' course of fever training were under consideration at the end of the year. The proposal in the scheme to award gold and silver medals to the probationers gaining first and second places respectively at each examination, provided they obtain a certain percentage of full marks, has been adopted by the Managers.

(d) *Generally.* The staff regulations for the hospitals, of which there are three separate codes, are under consideration with a view to their improvement and consolidation.

Regulations for the staff at the Belmont laboratories and stables were approved.

(e) *Clinical teacher in fevers.* We granted permission to Dr. Caiger, medical superintendent, South Western Hospital, to act for one year as clinical teacher in fevers under the Army Medical Service.

Patients. 4. (a) *Scarlet fever, diphtheria, enteric fever, measles and whooping cough.* The numbers of these patients under treatment at the beginning and the end of the year were as follow :—

	On 1st Jan., 1911.	On 31st Dec., 1911.
Scarlet fever ...	1,624	1,932
Diphtheria ...	811	1,269
Enteric fever ...	87	69
Measles ...	83	104
Whooping cough	45	237
	<hr/> 2,650	<hr/> 3,611

The highest number of patients under treatment during the seasonal rise in the autumn was 3,890, and the lowest number in the year was 2,495. In both cases there is an increase over the corresponding figures for 1910, but this is due in part to the admission of measles and whooping cough cases. This circumstance, however, accounts to a limited extent only for the increase, as the diminution in the number of fever and diphtheria cases to which we drew attention in our last two reports was not maintained. Scarlet fever, enteric fever and diphtheria were all more prevalent, and this was especially the case with diphtheria, the maximum number of cases of this disease under treatment being, indeed, the highest recorded during the last ten years.

The admission of cases of measles and whooping cough was designed for the purpose of utilising, to the advantage of the sufferers from these diseases the margin of unoccupied beds which at times exists in the fever hospitals, and the success of this measure has been well demonstrated in the first year in which it has been in operation, the period of their least prevalence having coincided with the period of greatest prevalence of fevers and diphtheria, and *vice versa*. The highest number of measles patients under treatment at one time was 883, on April 4th, and the the highest number of whooping cough patients was 338, on May 9th. The number of measles cases under treatment fluctuated much more than that of whooping cough cases.

The admission of measles patients, which was in the first instance limited to Poor Law cases, was extended, subject to certain restrictions, to non-pauper cases, by an Order of the Local Government Board dated 30th May, 1911.

In view of the possibility of the usual autumnal increase in the number of fever and diphtheria patients being sufficiently great to encroach on the accommodation required for measles and whooping cough, the question arose as to the best course to pursue under these circumstances with regard to the reception of cases of the latter diseases. Feeling that the Board would not, in view of the strong claims of measles and whooping cough to hospital treatment, desire to discontinue the reception of such cases entirely, we adopted a scheme (particulars of which we reported to the Board on 29th July) by which, if it appeared desirable, a few beds would be reserved for them in any case. The necessity did not, however, arise for putting this scheme into operation.

(b) *Smallpox*. An outbreak of smallpox, which originated in an institution at Mile End, occurred early in the year, and 93* cases were admitted. Happily the outbreak did not assume serious proportions and the hospitals were empty of patients from the end of August.

**Use of Fountain
Hospital for
mental cases.**

5. The Fountain Hospital (which throughout 1910 was used only for isolation cases from the Grove Hospital and for the discharge of recovered patients from that hospital) was, at the beginning of the year, handed over temporarily to the Children's Committee for the accommodation of feeble-minded girls. It was used for this purpose for the remainder of the year, but the Board having decided to utilise the institution as a temporary asylum for unimprovable imbeciles the control of it was transferred to the Asylums Committee.

**Diphtheria
antitoxin and
bacteriological
work.**

6. The Managers' request, made at our instance, for powers to supply the metropolitan borough councils with the antitoxin which those bodies have been authorised to provide for the poorer inhabitants of their districts, was answered by the Local Government Board in January with a statement that they had noted the application; but no further communication has been received on the subject.

* Uncorrected for errors in diagnosis.

Consideration was given to a report submitted by Professor Sims Woodhead, the Board's bacteriological adviser, embodying suggestions for a more extended use of the Managers' laboratories at Belmont, with the result that the medical superintendents of the several hospitals, and the Asylums and Children's Committees were reminded of the facilities for clinical investigations afforded by the laboratories.

Receiving rooms for measles. 7. In view of the general opinion of the medical superintendents that cases of measles should not be examined on admission in rooms used for the reception of patients suffering from another fever, the Managers, on our recommendation in November, sanctioned the principle of the provision of separate receiving rooms for this disease at the four hospitals where there was no existing accommodation suitable for this purpose, and where the temporary arrangements could not conveniently be continued.

Medical instruction. 8. (a) *Classes in fevers.* 239 students (of whom 16 were women) received clinical instruction during the year. It was decided to continue the practice, begun as an experiment in 1908, of holding morning classes. This arrangement was instituted with the object of arresting a serious decline in the number of students attending the classes at the Board's hospitals. With the assistance of a plan, whereby the classes at one of the hospitals have been held at different times of the year from the others, the arrangement has been fairly successful.

(b) *Classes in hospital administration.* Classes in hospital administration for candidates for the D.P.H. (the candidates not now being required to reside at the hospital) were again held and were well attended. No clinical assistants were appointed.

(c) *Classes in smallpox.* With a view to encouraging, in the interests of public health, both qualified men and medical students to avail themselves of every opportunity of acquiring a practical knowledge of smallpox, so rendering them better qualified to diagnose cases of that disease, some modifications were made, with the approval of the Managers and of the Local Government Board, in the regulations under which demonstrations at the Board's institutions in the diagnosis and treatment of this disease are given when opportunities arise.

The most important of these modifications were (i.) the abolition of the fee in the case of qualified medical men and of students attending classes in fever instruction at the Board's hospitals at the same time or within the previous six months, and its reduction in the case of other students; (ii.) the reduction of the duration of the ordinary course of study and of the number of attendances necessary to qualify for a certificate; and (iii.) the removal of the obligation on students to travel to and from the smallpox hospitals by means of the Board's steamboats.

Smallpox accommodation. 9. The decision of the Managers in July, 1910, to regard Long Reach Hospital and the pier buildings adjacent to it as their permanent provision for smallpox (Joyce Green Hospital being regarded as part of the fever hospital accommodation and only to be used for smallpox when required) suggested the reconsideration of a scheme which had been prepared in 1909 for the adaptation at an estimated cost of £900 of the pier buildings for the reception of about 50 smallpox cases. This review of the subject led to the Managers approving a larger scheme for the adaptation of the buildings. The first scheme, however, received the assent of the Local Government Board in August, who suggested that those portions of the buildings to be occupied by patients should be protected against fire. The work to be carried out for that purpose was estimated to cost an additional £655.

In connection with this subject the question of the protection against fire of the buildings of Long Reach Hospital was raised, and was under consideration at the end of the year.

Smallpox cases from extra-metropolitan districts.

10. A review of the arrangements which have been entered into from time to time by the Managers for the reception, under certain conditions, of smallpox cases from various extra-metropolitan districts, led to the authorities of the majority of such districts being informed that, as outbreaks of smallpox in places adjacent to the metropolis were not unlikely to synchronise with an epidemic in London, and in view of the rapidity with which smallpox usually assumes serious proportions, the assistance which such authorities might expect from the Managers would have to be limited to the reception of an intermittent case or two.

South Wharf—accumulation of mud.

11. A considerable increase having taken place in the rate of accumulation of mud in the vicinity of the pontoon at South Wharf, and the ambulance steamers having frequently grounded in consequence, negotiations took place with the Port of London Authority on the question of the removal of the mud, with the result that the Managers empowered us in June to arrange, in case of need, for the Port Authority to carry out, at the Managers' expense, such dredging as might be necessary to enable the ambulance steamers to be brought alongside the pontoon and moored there at all states of the tide.

Isolation accommodation.

12. In furtherance of the Board's policy respecting the provision of the additional isolation accommodation required, in the opinion of the medical superintendents, properly to equip certain of the acute hospitals in this respect—a policy which has already been carried out at some of the hospitals—plans for the conversion into chambers of two wards at the North Western Hospital, where some provision of this nature was considered to be urgently needed, were forwarded to the Local Government Board for approval in June. The Board, however, on 30th November, intimated (a) that they did not feel justified in assenting to the outlay (estimated at £2,800) on the particular form of isolation provision contemplated, until they were more fully assured of its necessity, and (b) that they were awaiting the receipt of a report then in preparation as to the general questions involved.

Gore Farm Hospital—change of name.

13. The title of the convalescent fever hospital at Dartford, hitherto known as "Gore Farm Hospital," was altered by the Board to that of "Southern Hospital," a change made primarily with a view to removing misapprehensions to which its former designation had given rise in the mind of the public.

Visitors to dangerously ill patients.

14. Our attention was called to the fact that the payment of the travelling expenses of very poor persons visiting patients who are dangerously ill (a practice which in recent years had superseded that of conveying, in accordance with an old regulation, such persons to the hospitals in the Board's vehicles) was, in the opinion of the Clerk to the Board, without legal authority.

The payment of such expenses being, in our opinion, the proper course in these cases, we took steps with a view to the authorization of the practice, and a request for powers in this behalf was made to the Local Government Board in April.

Purchase of fruit and vegetables.

15. The purchase of summer fruit and vegetables by formal contract being attended with obvious disadvantages, it was in March decided (subject to the Local Government Board's assent which they subsequently gave) to buy, as an experiment

during the summer, these supplies either out of cash or by the issue of emergency orders, as had been done for some years in the case of soft fruits.

This experiment proved successful as supplies were more varied and the prices paid were lower than in previous years. On the other hand, it revealed the need of some machinery whereby accounts could be paid without the delay incidental to the present procedure. It was therefore decided (subject to the sanction of the Local Government Board, which was awaited at the end of the year) to give the system a further trial of 12 months and to extend its scope. We also called the attention of the Finance Committee to the question of the payment of accounts.

Other matters. 16. The following are the more important works not elsewhere alluded to sanctioned by the Managers at our instance during the year, with the estimated cost in each case, viz. :—

- (a) Provision of additional steam coal store, South Western Hospital (£380).
(Sanction of Local Government Board being awaited at end of year.)
- (b) Provision of glass roof to verandah of a scarlet fever ward, Grove Hospital, for open air treatment of patients (£50).
- (c) Provision of bathrooms in isolation block, North Western Hospital (£123).
- (d) Installation of modern gas fittings, Southern Hospital and Joyce Green Hospital (£463 and £475 respectively), from which economies will result as well as improvement in lighting.

17. We desire in conclusion to record an expression of our sincere appreciation of the valuable services rendered by the several medical superintendents and their respective staffs.

(Signed)

J. SPRANKLING,

Chairman.

ANNUAL REPORT OF THE ASYLUMS COMMITTEE FOR 1911.

(1) We submit to the Board our annual report for the year ended 31 December, 1911.

Meetings.

(2) The number of meetings of the committee and sub-committees for the year was as follows :—

Asylums Committee	21
Sub-Committees at asylums ..	86
Other sub-committees	30
	<hr/>
	137

Chairman and Vice-Chairman.

(3) We re-elected Mr. Samuel Lambert, J.P., to be our Chairman, and Dr. H. Willingham Gell to be our Vice-Chairman.

Accommodation and inmates.

(4) The following table shows the accommodation available at the end of the year and the number of inmates :—

Asylum.	Accommodation.		Inmates.		Increase or decrease of inmates on previous year.	
	Males.	Females.	Males.	Females.	Males.	Females.
Leavesden	980	1,184	959	1,116	+57	+48
Caterham	972	1,137	947	1,104	+ 5	—13
Darenth	1,104	1,004	1,171	898	+43	+56
Tooting Bec	514	600	491	584	+33	— 1
Totals	3,570	3,925	3,568	3,702	+138	+90

Other statistics.

(5) The applications for admission during the year numbered 1,121, compared with 1,021 during 1910. The admissions, discharges and deaths are shown in the following table :—

Admitted.						Number.	Increase or decrease on previous year.
Adults over 70 years of age .. ..	..	..	..	..	..	249	+37
„ between 16 and 70 years .. ..	..	..	..	..	..	589	+85
Children between 5 and 16 years .. ..	..	..	..	..	..	160	— 1
„ under 5 years .. ..	..	..	..	..	..	40	+ 2
Total .. ..	..	..	..	..	..	1,038	+123
Discharged .. ..	..	..	..	..	..	127	+ 8
Died .. ..	..	..	..	..	..	683	+89

Admissions. (6) Under existing arrangements all cases presented for admission, except transfers from the County Asylums, are in the first instance received at Tooting Bec Asylum, and the following table shows the destination of the cases transferred thence to other asylums, viz. :—

From Tooting Bec Asylum to—

	Children.	Adults.
Darenth	172	60
Leavesden	—	132
Caterham	—	76

The following table shows the admissions to Darenth via Tooting Bec during the last seven years, viz. :—

Year.	Adults (all considered improvable).	Children under 16.	Condition at time of transfer.*		Percentage of children considered improvable.
			Improvable.	Unimprovable	
1905	46	139	70	69	50
1906	69	164	82	82	50
1907	44	174	49	125	28
1908	70	234	72	162	30
1909	85	192	49	143	26
1910	54	179	63	116	35
1911	60	172	64	108	37
	428	1,254	449	805	36

Re-classification of mentally defectives.

(7) The past year has been rendered especially noteworthy by the adoption by the Board of a scheme for the re-classification and systematic treatment of the whole of the mentally defective cases who come into the Board's care. From its formation in 1867 the Board have been responsible for providing for "insane" persons chargeable to the metropolitan boards of guardians of the poor. This class was subsequently defined as such "harmless persons of the chronic or imbecile class" as could lawfully be retained in the workhouse, and it is the class which has hitherto been received into the asylums under the control of the Asylums Committee of the Board. In 1897 the Board were entrusted with the care of children, who, by reason of defective intellect, could not properly be trained with children in ordinary schools, and this feeble-minded class has been received in homes and schools under the control of the Children's Committee. At the close of 1910 a special sub-committee of the Managers were engaged upon a thorough review and reconsideration of the existing arrangements under the Board for dealing with the imbecile and feeble-minded classes, and the adoption of their report, which was presented to the Board in February, 1911, marks the opening of a new era in this work.

Briefly stated, their recommendations involved the placing of the mentally defectives of all grades, who come under the Managers' care, in the hands of one committee, and that the Asylums Committee, and the transformation of the institution at Darenth from an asylum for imbeciles into an industrial colony reserved for the highest grades of mentally defectives.

It was necessary to find immediately some additional accommodation for the unimprovable imbeciles who, under this scheme, would be removed from Darenth, and, in view of the objections urged against the use of the Lower Gore Farm Hospital as an imbecile asylum, unless works involving a large outlay were

* These figures are based on information from Tooting Bec Asylum.

undertaken there, the Board decided to use the Fountain Hospital, Tooting Grove, as a temporary asylum for imbeciles, and the Local Government Board sanctioned this proposal for a period of one year.

We can have no doubt that many advantages will accrue from the co-ordination of work, which is an integral part of the scheme outlined above, not the least of which will be those emphasised by the special sub-committee in their report, viz., increased efficiency by affording larger facilities for training and by rendering more industries available, avoiding duplication of machinery and giving greater opportunities for classification under one medical control. The cost per patient is necessarily much lower in a large well organised colony such as Darenth than in small scattered homes.

Within the confines of Darenth a complete scheme of classification will be enforced, and the pavilions have been separated from the rest of the colony, and will be occupied solely by the feeble-minded cases admitted under the Local Government Board's order of 1897. Those who are familiar with the success already achieved at Darenth on the industrial side with the higher grade of improvable imbeciles already received there will have no fear as to the future of that institution under the new régime.

Age of admission of feeble-minded. (8) Another proposal adopted on the recommendation of the special sub-committee was that the powers of the Board with regard to the feeble-minded should be enlarged by the removal of the restriction which at present limits the admission of feeble-minded persons to children under the age of 16 years, but at the end of the year no reply had been received from the Local Government Board on this point.*

Patients' dietary. (9) In our last report we referred briefly to the question of the revision of the dietary scales for patients in the Managers' asylums, which we were contemplating, with a view to introducing uniformity, and stated that we then had before us a report on the subject by the medical officer for general purposes. The outcome of our consideration of this report in conjunction with the medical superintendents was that in April, the Managers, with the subsequent sanction of the Local Government Board, approved, for a tentative period of one year, of a revised scale and formulæ for the preparation of foods which we submitted to them. Under this scale, which came into operation on 1 July, and which lays down maximum quantities from which each medical superintendent draws up his own diets for the patients, there is greater variety in the food supplied to the patients than was the case under the old scales. We were furnished with an interim report on the working of the new scale after a four months' trial, and we are pleased to be able to record that all the medical superintendents spoke with approval of it, and stated that not only did it appear to have given satisfaction to the patients, but also that it promised to effect a saving.

Ophthalmia. (10) In our last report we referred to the appointment of Mr. A. Macnab as consultant in connection with the treatment of ophthalmic cases in the Managers' asylums. His appointment was, in April, extended for a further year.

Enteric fever. (11) Small outbreaks of enteric fever having occurred in the early part of the year at both Caterham and Leavesden asylums, the matter was investigated by the medical officer for general purposes, and we received from him a full report on the subject, in which he suggested certain precautions, with a view to the prevention of outbreaks in future. As the result of consultations with the Board's

* The Local Government Board have issued an order dated 29th December, 1911, increasing the age of admission to 21 years.

bacteriological adviser (Prof. Sims Woodhead), the bacteriologist (Dr. Cartwright Wood), the medical superintendents, and the medical officer for general purposes, we decided that, for the present, the Widal test should be applied to patients of dirty habits, priority being given to those patients who had been most recently admitted, it being understood that, in the case of all positive reactions, such further examinations as might be necessary would be made. It is too soon yet to be able to judge of the effect of the adoption of these precautions.

Darenth. (12) In February last it was decided to increase the normal accommodation of Darenth by 114 beds, from 1,994 to 2,108.
Normal accommodation. The Board consider that the possibilities of providing additional accommodation at Darenth have not yet been exhausted, and have instructed us to prepare a scheme for the enlargement of the colony by having in readiness the plans of a suitable pavilion which could be erected and duplicated as required.

Staff. (13) By the death in October of Miss Hargreaves, head schoolmistress and matron of the training school at Darenth, the Managers lost a valuable officer, who had been in their service for over ten years. Following upon Miss Hargreaves' death, the Managers, upon our recommendation, and with the subsequent sanction of the Local Government Board, resolved to effect some further consolidation of the administration of Darenth, by placing one matron only in control of the female side of the institution, giving her the assistance of two assistant matrons, one head school teacher, and four head day attendants. Under this new arrangement, the responsibilities of the matron, so far as the training school is concerned, do not extend to the teaching of the patients, but are limited to ensuring the cleanliness of the buildings and the general welfare of the patients. The duties of supervising the teaching and occupations and keeping the school accounts and stock are discharged by the head school teacher, whose salary was increased. Miss Jeanette Ferrier, who had been matron of the industrial colony at the asylum since December, 1906, was appointed matron of the whole of the institution, and in view of the extent and importance of the additional responsibilities thus entailed upon her, she received an increase of salary.

Additional workrooms. (14) These workrooms, which we stated in our last report were in process of erection, were completed in July, and brought into use.

Water-softening plant. (15) In April, 1905, the Managers approved of certain alterations in the hard and soft water services at this asylum, the effect of which was that the Southern Hospital, which draws its water from the asylum, was supplied with hard water only. Considerable trouble having been experienced and expense caused at the hospital on account of the extreme hardness of the water, the Hospitals Committee asked us to consider the question of softening the water supplied to the hospital. As the result of our detailed consideration of the whole question, we submitted to the Managers, in October, a scheme, prepared by the assistant engineer, for the extension of the water-softening plant at the asylum by the construction in ferro-concrete, on the Hennebique system, of three separate covered settling tanks, each of 100,000 gallons capacity, at a total estimated cost of £2,000, the total annual charges, *i.e.*, additional cost of maintenance, interest and depreciation, being estimated at £195. The Managers adopted the scheme, subject to the sanction of the Local Government Board, which they were still awaiting at the end of the year. The annual saving which it is anticipated will result from the adoption of the scheme is £235 when the asylum and upper hospital are in full use, and £395 when the lower hospital also is in full use.

Roofing in upper male workshops yard. (16) In November, the Managers approved a scheme prepared by the assistant engineer, which we then submitted to them, for roofing in, at an estimated cost of £700, subject to the sanction of the Local Government Board, the upper yard of the workshops for males at this asylum, to enable patients to work out in the yard in mild weather, and thus relieve the crowded state of some of the workshops. The Local Government Board suggested an alternative to the Managers' proposal, and the matter was still under consideration at the end of the year.

Assistant craftsman. (17) The industries carried on at Darenth having increased in number and developed to such an extent that it became obvious that to supervise them all, and, in addition, to perform the duties of clerk of the works for the institution, were beyond the powers of the craftsman, we recommended the appointment of an assistant craftsman, which was agreed to by the Managers in October. The appointment of this officer will not only afford to the craftsman assistance which was absolutely necessary, but also will ensure that the Managers will have at their disposal the services of an understudy to an officer whom, on account of the extremely diversified character of the work he has to supervise, it would be a matter of some difficulty to satisfactorily replace in case of necessity.

Industrial work. (18) The medical superintendent of Darenth, in his annual report, to which we direct special attention, gives an interesting and detailed account of the progress made with this work. Another important advance has been made in the industrial section at Darenth by the equipment of a printer's shop, in which it is hoped to undertake the printing of stock forms and other work required by the Board.

Leavesden Asylum. Gas supply. (19) In January, the Watford Gas and Coke Co., who were contemplating a gas supply to the Leavesden district, enquired whether the Managers would be prepared to take a supply of gas from them, instead of making it themselves. As the result of negotiations between the Engineer-in-chief and the company, the latter agreed to supply gas at the rate of 2s. per thousand cubic feet, an offer the acceptance of which the Engineer-in-chief considered would lead to economy, and would be strongly in the Board's interests, the cost being less than that at which the Managers could manufacture gas. In view of this expression of opinion, the Managers, on our recommendation, accepted the offer, for a period of 14 years, terminable at the option of the Managers at the end of the first seven years. The supply of gas by the company commenced on 10 November.

Iron bridges between blocks. (20) In our report for the year 1906 we stated that a proposal to provide at this asylum iron bridges similar to those which were constructed many years ago at Caterham Asylum and to those provided at the most recently built asylum—Tooting Bec—had been abandoned, owing to an intimation from the Local Government Board that they were not prepared to authorise the expenditure (£7,000) which it was estimated would be involved. In November, 1908, November, 1909, and again in June, 1911, the Commissioners in Lunacy urged the construction of these bridges, on the grounds that they would permit of the aged and infirm patients being taken out into the open air, that they would form further means of ready escape in case of fire, and that they would provide increased facilities for supervision. Having regard to the steady aggregation in recent years of infirm and helpless patients in the blocks at this asylum, to the many occasions on which the provision of these bridges had been pressed upon the Managers by the Commissioners in Lunacy, and by their own expert advisers, and to the several objects of the highest importance which the bridges would fulfil in respect of the

safety and health of the inmates, the Managers, in November, on our recommendation, informed the Local Government Board that they could no longer accept responsibility for inaction in the matter, and again asked their sanction to the provision of the bridges. At the close of the year the proposal was still under consideration by the Local Government Board.

Caterham Asylum. (21) It having become apparent that the present area of land at this asylum available for sewage irrigation was insufficient for the large volume of sewage which now has to be treated, negotiations were entered into with the Caterham Urban District Council, with a view to the reception of the asylum sewage into the Council's system. When the Council were about to carry out their present sewage disposal scheme in 1905, the Managers were asked whether they wished provision made for dealing with the asylum sewage, but they replied in the negative. As, in these circumstances, there appeared to be a moral obligation on the part of the Managers to make some contribution to the cost of the works which will now have to be carried out in order to receive the asylum sewage, they agreed in November, on our recommendation, to request the Council to execute the necessary work, and to contribute £900 towards the cost, subject to the assent of the Local Government Board. At the end of the year this assent had not been received.

Tooting Bec Asylum. (22) In our last report we mentioned that metallic filament lamps had been provided at this asylum, and stated that we anticipated that a substantial saving would thereby be effected. We are pleased to be able to state that our expectations have been realised, the net saving during the first six months these lamps were in use having been £267.

Electric lifts. (23) In the scheme for the erection of two additional blocks at this asylum in 1907, provision was made for the installation of hand lifts, similar to those in the older blocks, and the shafting for these lifts was duly constructed. A suggestion was made, however, that electric lifts should be provided instead of the hand lifts. The latter were omitted, but nothing further was done, and the whole matter remained in abeyance, pending the settlement of the question of the consumption and cost of electricity supplied to the asylum, to which we alluded in our last report. As the result of our reconsideration of the matter, the Managers, in July, adopted a proposal we then submitted to them, that an electric lift capable of carrying 5 cwt. should be provided in each of the two blocks, at an estimated cost of £210 per lift. These lifts will not only serve for the conveyance of food, stores, coal, etc., to the first and second floors of the blocks, but will also enable many of the aged and infirm patients to be brought down to the airing courts in suitable weather.

Fountain Temporary Asylum. (24) Consequent upon the decision above referred to, with regard to the use of the Fountain Hospital, the control and management of the hospital were transferred by the Managers to the Asylums Committee. The necessary disinfection, cleaning and adaptation of the institution were at once begun, and it is hoped that the temporary asylum will be ready for the reception of the patients from Darenth early in the new year.* The Local Government Board approved of the normal accommodation being fixed at 624 beds. Dr. E. B. Sherlock, senior assistant medical officer at Leavesden Asylum, and formerly acting medical superintendent of Belmont Asylum, was appointed acting medical superintendent, and Miss F. Harris, then in charge, as acting matron, of the colony for feeble-minded located at the Fountain Hospital, under the Children's Committee, was appointed acting matron of the temporary asylum.

* Admission of imbeciles began on 12 February.

**Darenth and
Leavesden
Asylums.
Conveyance of
Managers and
staff to and from
stations.**

(25) The replacement, by a motor omnibus, of the horses and vehicles hitherto used for the conveyance of Managers, staff and others between Darenth Asylum and Dartford railway station, was decided upon early in the year. The motor omnibus came into use on 1 May, and has proved a great success. Steps are being taken for the provision of a similar vehicle at Leavesden Asylum.

**Celebration of
Coronation.**

(26) The Coronation of His Majesty King George V. was celebrated by the holding of entertainments for the patients at each of the asylums, and the allowance to them of extra fare, and by the granting to the staff of extra leave.

**Lunacy
Commissioners'
reports.**

(27) Visits were made to the several asylums by Commissioners in Lunacy during the year. Copies of their reports are appended, in accordance with practice.

We made an exhaustive enquiry into the two chief points raised by Dr. Cooke on his visit to Leavesden Asylum on 16 June, involving questions relating to issues of margarine to patients and bacon to staff, and the result was duly communicated to the Lunacy Commission and to the Local Government Board.

**Inspection of
asylums.**

(28) In accordance with the arrangement, referred to in our last report, that, in future, Darenth Asylum only should be inspected every year and the others in alphabetical rotation, Leavesden

Asylum should have been inspected in 1911. As, however, somewhat extensive repairs were in progress there, we deferred the inspection until 1912.

The institutions at Darenth were inspected by the Board on 8 July, and it is satisfactory to record that 44 Managers were present.

Conclusion.

(29) We desire once more to express our appreciation of the way in which the medical superintendents and the staff generally have carried out their duties.

(Signed) SAMUEL LAMBERT,
Chairman.

APPENDIX I.

REPORTS OF COMMISSIONERS IN LUNACY ON VISITS TO ASYLUMS DURING THE YEAR 1910.

A.—TOOTING BEC ASYLUM.

REPORT OF DR. L. L. SHADWELL.

21st March, 1911.

Since the 1st of February, 1910, when this asylum was last visited by a Commissioner, 832 patients have been admitted, 479 discharged, of whom 13 had recovered, and 312 have died. There are now on the books the names of 1,027, of whom 458 are of the male and 569 of the female sex. The accommodation is sufficient to provide for additions of 56 to the number of the males and 31 to that of the females.

The average charge per week for maintenance shows a further reduction upon that in force at the last visit, being now 14s. 1½d.

All the patients are in residence and have been seen by me in the course of my visit. I was much pleased with the condition in which I found them as regards dress and personal tidiness, especially the women. They were everywhere quiet and well-behaved. A few appealed for discharge, but there were no complaints of ill-treatment and many grateful acknowledgments of kindness received.

I visited all parts of the asylum and found it in excellent order. Some re-painting is required in the staircases, which is about to be taken in hand. The well-constructed wards were bright and prettily decorated with spring flowers. The ventilation was satisfactory, but at the same time a comfortable temperature was maintained. The beds and bedding were good and sufficient. I examined a considerable number and found them with but few exceptions clean and properly attended to. There are, it may be observed, a very large number of wet and dirty cases.

The tar paving of the airing courts at the rear of the new blocks has been completed.

Dinner, consisting for those who were not on special diet, of meat and potato pie, was neatly served during my visit with evident satisfaction to those who partook of it.

No use of mechanical restraint has been recorded during the period under review; one female patient has been secluded on 10 occasions for 11 hours in all.

Three inquests were held during the period, in two of which the deaths were found to have been the result of accident, and in the third of natural causes. The causes of death were verified in over 90 per cent. by post mortem examination. In 59 per cent. the cause was senile decay; in 11.9 per cent. pneumonia or bronchitis; and in only 2.6 per cent. phthisis. Bed sores were present in 5.1 per cent. of the deaths, but only one of those whom I saw in bed to-day was suffering from this complication.

The only epidemic of zymotic disease by which patients have been attacked has been measles, of which there were four cases on the male side in February. One attendant was attacked by typhoid fever in December.

There have been four cases of fracture of the femur, one of the ankle and one of the forearm, all caused by falls which, except in one instance of pushing down by another patient, were purely accidental.

The staff of attendants and nurses is of adequate strength, averaging for day duty about 1 to 9 patients. Seven have, since the last visit, been dismissed or required to resign for misconduct, which did not, however, in any instance consist of ill-treating patients.

(Signed) L. L. SHADWELL,

Commissioner in Lunacy.

B.—DARENTH ASYLUM.

REPORT OF DR. F. NEEDHAM.

8th March, 1911.

Yesterday I made a complete inspection of the Metropolitan Asylum at Darenth, visiting all parts of it and seeing all the inmates except five who were isolated for scarlet fever.

I can give a very favourable report of the state in which I found the whole establishment and of the comforts provided for the patients and the kindness shown to them.

The day rooms were throughout in very good order, although there were necessarily, in so large an institution, places in which some reparation of paint and whitewash was needed and will in due course be supplied. Much of the elaborate Christmas decoration had been left up and contributed greatly to the bright and cheerful aspect of the wards, which were also supplied freely with other objects of interest.

The dormitories were clean and well-ventilated, and the beds and bedding, much of which I examined, in excellent order. Some of the floors which are at present scoured might, I think, with advantage be painted with boiled linseed oil and made non-absorbent.

I noticed pipe-loops in many w.c.'s, which should be cased in or otherwise protected, for although patients are not kept here who are known or believed to be suicidally disposed, much regrettable experience has shown that it is not safe to rely upon this fact.

The new female workshops are rapidly approaching completion. They will be well lighted and afford good accommodation for their purpose, and they are to be heated entirely by hot-water radiators. It is greatly to be desired that a similar extension may be effected on the male side.

The patients were almost universally contented, and in only two or three instances were complaints made to me, and these were, so far as I was able to ascertain, unfounded. Dress and personal neatness were, upon the whole, very well looked after; but I thought that a somewhat higher standard of neatness might be maintained in some of the men, especially the ward workers. The dress of the women and children was good and varied and showed much attention on the part of the nurses.

The general health was good, and although 101 persons were in bed during my visit, 63 of them were in the ward in which recent cases of scarlet fever have occurred, only to be watched and to that extent isolated. The remaining 38 represented less than 2 per cent. of all the patients. No one was suffering from a bed-sore, and it is highly creditable to the nursing of the sick and of the helpless, of whom there are so many, that no patient who died was found to have a bed-sore. I was glad to find that nursing spirit generally present which regards a bed-sore as a reproach, if not a disgrace.

I saw a substantial dinner of meat and potato pie and bread, and in many cases of mince, neatly served in the wards. It was well cooked and appetising. I thought that in one of the rooms at least there was some overcrowding at the tables.

Three females and two males were in the isolation hospitals, suffering from scarlet fever, of which nine cases have occurred since the last visit a year ago. There have been also 12 cases of typhoid fever, their origin unascertained, and five of erysipelas, but no other cases of any zymotic disease.

Three fractures of bones have been the only results of casualties, and all of them were due to accidental falls.

There has been no resort either to mechanical restraint or seclusion.

Since the last visit 243 patients have been admitted, 175 discharged, and 52 have died, leaving the numbers resident yesterday, 1,957, of whom 1,123 were males and 834 females. There are vacancies for 37 additional patients. The weekly charge is 9s. 7d. per head per week.

All the deaths were due to natural causes, and there has been no inquest. Post-mortem examinations were made in 79 per cent. of the deaths, of which 26 per cent. were from phthisis and other forms of tuberculous disease. There are 27 per cent. of epileptics in the asylum, and 6.5 per cent. of those who nightly wet their beds.

About 40 per cent. attend Divine Service in the Chapel on Sundays; 44 per cent. the entertainments; 21 per cent. walk beyond the asylum premises, and 55 per cent. in them, but beyond the airing grounds, to which only 7.7 per cent. are altogether confined.

Useful and profitable employment is found for nearly 60 per cent. of the inmates, and I saw large numbers of them engaged in the shops and schools and elsewhere upon wood-chopping, gardening, brush, mat, basket and shoe making, carpentering, tailoring, and many other forms of plain and ornamental work. A recent decision of the Metropolitan Asylums Board, now under consideration by the Local Government Board, contemplates the wide extension of these operations of the asylum and its evolution into what will be practically an industrial colony, provision being made elsewhere for chronically sick, helpless, and feeble patients.

A good staff of attendants and nurses is maintained, averaging one to every 12 patients and showing a fairly good record of service, 17 per cent. only having served less than a year and 33 per cent. upwards of five years.

The state of the asylum in all its parts shows that Dr. Rotherham, who has the assistance of three medical colleagues, successfully devotes his best energies to its administration.

(Signed) F. NEEDHAM,

Commissioner in Lunacy.

C.—CATERHAM ASYLUM.

REPORT OF DR. SIDNEY COUPLAND.

28th July, 1911.

I have to-day visited this Asylum, and can report with satisfaction that it continues to be maintained in excellent order under the able administration of Dr. Campbell.

Owing to the increasing number of patients, many of whom have been transferred from Darenth, of the feeble and degenerate class, whose helpless state and faulty habits call for much individual attention, the institution is gradually assuming the character of an infirmary. There are now only three blocks which are utilised as primarily designed, viz., with a large day room on the ground floor, and the two upper floors serving as dormitories; the remaining ten blocks each consisting now of three infirmary wards. This departure from the original asylum plan must, for its efficient working, necessitate a considerable increase in the attendant staff, to whom credit is due for the generally tidy appearance of the inmates. Advantage is taken of the open galleries connecting the upper floor of adjacent blocks to afford the helpless inmates of these wards the benefit of the open air, as it is obviously impossible for them to be conveyed to and from the airing courts. Throughout this fine summer the whole length of these galleries has been daily occupied by seats containing the cripples and infirm, who pass their lives between the ward and the restricted area of the gallery, and although it is fortunate that even such means for their taking the air are available, the plan affords but a poor substitute for the freer space of an airing court.

The wards and dormitories are kept in a thoroughly satisfactory condition, being clean, bright and well-ventilated. The bedding too is generally well kept, but in a few instances I found sheets much worn and in evident need of renewal.

I was struck, as on former visits, with the scanty supply of literature afforded to the inmates, many of whom would, I am sure, derive much pleasure as well as profit, from a mental standpoint, could they enjoy the opportunity of simple reading and looking through illustrated periodicals.

The patients were for the most part neat and tidy in their appearance, and there were not many whose destructive habits rendered a strong dress necessary. But I cannot say that the blue garb worn by some of the men was at all suitable or sightly, and should be glad to learn that it has been discontinued.

During my visit I saw a good dinner of boiled bacon with two vegetables and bread served in the wards. It seemed to be fully appreciated.

I gave to each patient whose mental condition justified it full opportunity of speech with me. From no one did I receive any complaint as to treatment, and I thought that the appeals for discharge were fewer than might have been expected. One may reasonably infer, therefore, that they are for the most part contented and are considerably treated. By segregating in two wards those who are destructive and faulty in their habits, as well as annoying in their conduct to others, Dr. Campbell has found good results to accrue, not only in ensuring more orderly behaviour generally, but in respect to the patients who are thus placed. He has also located all the juvenile degenerates, who now constitute a large class, in one block on each side, which is of distinct advantage both from the administrative and the medical point of view. The allocation of a separate ward for tuberculous cases is a decided improvement.

Since the visit paid by my colleague on the 15th December last, 73 patients have been admitted, 14 have been discharged or removed (two of whom had recovered) and 132 have died from natural causes. These changes leave on the books the names of 895 males, and 1,098 females, all of whom were seen by me to-day. As the estimated total sleeping accommodation is for 2,109 patients, there are at present vacancies for 116 in all, or for 77 males and 39 females.

The maintenance charge per head per week is 9s. 7½d.

There has been no employment of mechanical restraint, and only one patient has been secluded on one occasion for a period of 25 minutes.

The proportion of epileptics under care was to-day 23·8 per cent. of the total in residence. There were 76 patients confined to bed, amongst whom were several senile cases, but not many suffering from serious disease. Of those who have died in the period under review as high a proportion as 12·8 per cent. had bed sores at the time of death, attributable in great measure to the very large proportion of aged and feeble subjects of faulty habits.

The causes of death have included one case of general paralysis, 20 of phthisis (or 15·1 per cent.), 11 of senile decay (or 8·3 per cent.), and 9 of ulcerative colitis (dysentery). Post-mortem examinations were made in the satisfactory proportion of 84·8 per cent. of the total deaths. No inquest has been held.

Eight of the female patients and one of the nurses were attacked by typhoid fever in the months December to March, there being one death. These cases, together with those of dysentery, above mentioned, are the only instances of zymotic disease recorded.

Two female patients sustained fractures of the forearm, one being due to an accidental fall, the other to being pushed down by a fellow patient.

From the returns made to our office I learn that during last year about 38 per cent. of the patients are usefully employed, a proportion which is likely to be considerably lessened owing to the admission of a growing number of those who are incapable of any employment. About 17 per cent. attended the Church of England services, and there were 165 patients of the Roman Catholic faith, for which the services are held in the laundry day room every Sunday by a salaried priest. The attendances at the weekly entertainments amounted to 23 per cent. of the inmates.

About 10 per cent. usually walked out weekly beyond the Asylum estate, whilst 54 per cent. of those able to walk were confined to the wards and airing courts.

The proportion of day attendants to patients last year was as 1 to 12, and the record of service is good, 46 per cent. of the male and 29 per cent. of the female attendants having served for upwards of five years. Since the last visit no attendant has been dismissed or allowed to resign to escape dismissal.

A new scheme of dietary is now being tried as an experiment. It affords greater variety in the meals and so far has given general satisfaction. Dr. Campbell has also rearranged the time table, so as to avoid the clashing of the dinner hour of the patients with that of the staff, thus enabling all the attendants to be present during the patients' meal, besides affording more time for the latter to be out of doors during fine weather.

Amongst alterations and structural improvements since the last visit have been the provision of additional w.c. accommodation owing to the conversion of male F. block into infirmary wards and the substitution of more modern arrangements in this regard. Glazed panels have been placed in the doors leading to the bakehouse, general kitchen and stores, for the purpose of observation, the need for which became apparent on the occasion of a fire which broke out in the kitchen when it was being repainted.

A new engine is being fixed for driving the laundry machinery, and suitable protection of machinery as required by the factory inspector is being fitted. It may be hoped that a new calender will soon be provided in view of the very large amount of laundry work required for the institution.

(Signed) SIDNEY COUPLAND,

Commissioner in Lunacy.

D.—LEAVESDEN ASYLUM.

REPORT OF DR. E. MARRIOTT COOKE.

17th June, 1911.

I yesterday made a complete inspection of the Metropolitan District Asylum at Leavesden, visiting in the course of it all the wards and administrative departments, and seeing all the patients, who numbered 2,045, of whom 919 were males and 1,126 females, and giving to each one of them an opportunity of speaking with me.

Arising out of my inspection were two matters which demand prominent notice in this report and early attention at the hands of the Managers.

The first matter was the outcome of a complaint by a fairly sensible patient (A.E.M.) confined to bed in Male 8B ward, where there were 57 patients, as to the very inadequate amount of margarine given him for breakfast and tea. On enquiry, I was told that the authorised allowance at each of these meals was half an ounce per patient, and that the amount required for each ward was sent up daily from the stores. I asked to see the margarine that had been supplied to the ward in question for tea last evening and breakfast this morning, and on weighing it found it to be nearly 9 ounces short in weight. I then discovered in another part of the cupboard where the food is kept a covered earthenware dish which contained no less than $5\frac{3}{4}$ lbs. of margarine. As the charge attendant of the ward could not satisfactorily account for the presence of this, I could arrive at no other conclusion than [that] it was margarine which had been withheld from the patients and intended to be used improperly.

The second matter relates to a written memorial which was handed to me. It was signed by 19 male attendants who are boarded in the asylum, and stated that the signatories had great cause for complaint about food supplied to them on the 15th instant, and requested that I would make an investigation. On shewing the memorial to Dr. Elkins he expressed the opinion that the complaint of the attendants was well founded, and said it arose out of some bacon which had been supplied to them and which they did not consider good. On Dr. Elkins being appealed to, he took the attendants' view, but the steward refused to condemn the bacon and issue other in its stead. Thereupon Dr. Elkins forwarded the bacon to the Medical Officer for General Purposes, who has pronounced it as having a most offensive odour and as being quite unfit for human food.

Dr. Elkins said he intended to bring this matter and also the first one I have mentioned to the immediate notice of the Managers, and I asked that our Board might, in due course, be informed as to the action they have taken with regard to both. I saw the senior of the male attendants who had signed the memorial, and told him that, having enquired as to what was being done, I did not consider further action on my part necessary, beyond that of referring to their memorial in my report.

Since the visit of my colleague on 20th January, 1910, 354 patients have been admitted, 109 have been discharged, none of them on recovery, and 190 have died.

I gave to every one of the patients an opportunity of speaking with me, but the majority of them were too demented to avail themselves of it. Those who did speak were, with few exceptions, contented and happy. Many of the cases are very feeble or quite helpless, and about three-fourths of the total number are unable to make themselves at all useful or even attend to their own personal requirements. Nevertheless, they presented a clean, well-cared-for appearance that was highly creditable to the staff. 23·4 per cent. of the patients suffer from epilepsy, and 1 per cent. are general paralytics.

The sick are carefully nursed. Eighty-one patients were confined to bed. Among them were 3 mild cases of dysentery, from which disease 29 males and 2 females have suffered during the period under review, and in the isolation hospital was a woman suffering from enteric fever, of which there have been during the last nine months 8 cases (2 fatal) among the patients, and 2 cases among the staff. The phthisical patients and the ophthalmic cases, of which there are at present 38 on the male and 71 on the female side, are respectively segregated in special wards, the latter having now the advantage of the advice of a specialist, who visits weekly.

It is satisfactory to learn that in 98 per cent. of the deaths the cause was verified by post-mortem examination, and that on only one of the bodies did a bed-sore exist. 19·5 per cent. of the deaths were due to phthisis, 15 per cent. to senile decay, 9·5 per cent. to epilepsy, 10 per cent. to chronic brain disease, and 5 per cent. to general paralysis. One woman died from an abscess of the gullet, which contained a mutton bone; another from perforation of the intestine, caused by swallowing rubbish; and a man from chronic brain disease and fracture of the skull, caused by his accidentally falling from a chair. It was, however, only in the last-mentioned case that the coroner deemed an inquest necessary. In addition to this fatal casualty, for which the jury considered no one blamable, there have been 16 other, more or less serious, injuries. Most of them were fractures of bones, occasioned by falls of an accidental nature, as the result of epileptic fits or the roughness of fellow patients.

No one has been secluded or mechanically restrained.

The dietary is to be improved and greater variation made in the meals. More attention should be paid to the warming of the plates used for dinner, and I strongly recommend that an apparatus for frying fish should be provided. The boiled fish I saw served to-day looked the reverse of appetising.

Since the last visit, the ceilings throughout the whole asylum have had to be renewed. With the exception of some whitewashing, the work has been completed, and the day-rooms and dormitories everywhere had a comfortable, well-kept appearance; they were also well ventilated. The beds and bedding were in excellent order.

From the fact that in the whole establishment there are now only three wards not regarded as infirmary wards, I consider that there has become an increased need for carrying out the recommendations made in my report of November, 1908, that some at least of the blocks should be coupled up by iron bridges.

The airing courts are well shaded by trees, and supplied with shelters, but the surface of many of the paths is rough and loose, and must be uncomfortable to walk on and destructive to boots.

In the laundry I noticed that the guard to the calender afforded insufficient protection.

The arrangements for holding the Church of England services and those according to the Roman Catholic faith are satisfactory, and the services are as well attended as could be expected, considering the mental state of the patients.

The staff for day duty consists of 86 male attendants and 100 nurses, giving a proportion of 1 attendant to every 10 male patients and 1 nurse to every 11 female patients. Having regard to the fact that the female patients are as a whole more helpless and useless and more troublesome than the male, I think the proportion of day staff to patients on the female side should at least equal that on the male side. For night duty there are 20 male attendants and 24 nurses. The record of length of service among the men is distinctly good, only 13 per cent. having been engaged within a year, while 62 per cent. can count over five years' service. With regard to the nurses, on 31 December last 28 per cent. had been engaged within the year, while 26 per cent. could count over five years' service. I understand that there is considerable difficulty in obtaining suitable women to fill vacancies as they arise.

(Signed) E. MARRIOTT COOKE,

Commissioner in Lunacy.

ANNUAL REPORT OF THE CHILDREN'S COMMITTEE FOR 1911.

I.—GENERAL.

**The com-
mittee's
work.**

1. We submit to the Board our fourteenth annual report for the year 1911 on the care and treatment of the special classes of poor law children for which the Board is responsible,* viz. :—

- (a) Sick, debilitated and convalescent children ;
- (b) Children suffering from contagious disease of the skin or scalp ;
- (c) Children suffering from ophthalmia or other contagious disease of the eye ;
- d) Mentally and physically defective children.

These children are provided for in two hospitals for sick children, three sanatoria or homes at the seaside, two ophthalmia schools, one ringworm school, and seven homes and country colonies for the mentally deficient. The total accommodation of these institutions is approximately 3,560, and the staff ordinarily employed numbers 1,080. In this report, except for a few preliminary observations, each class of children is dealt with in a separate section.

**Arrangement
of work.**

2. A visiting sub-committee is formed for each school and home, except in the case of the small London homes where there is one sub-committee for the whole group. An additional central sub-committee is constituted by the chairmen of the other sub-committees, for the review of all questions of finance, accommodation, nursing and medical staff, and of matters relating to more than one institution. Lastly, we receive reports on the work of all sub-committees. By an arrangement for adding one member to each sub-committee from a monthly rota, every member is afforded an opportunity of becoming acquainted with each branch of the work and with institutions of each class.

**Chairman,
vice-chairman
and committee.**

3. We re-elected Mr. R. Woolley Walden, J.P., to be our chairman, and Miss I. M. Baker to be our vice-chairman. During the year we had to regret the loss by death of Mr. J. Lower, a member of the committee since May, 1904, and chairman of Millfield from June, 1907, to May, 1910. Admiral Henderson did not re-join the committee in May, and Mr. Eickhoff and Mr. W. Smith were added. Mr. Fowle was added to the committee in July, but resigned in November.

Meetings.

4. We held 21 meetings during the year, and, in addition, our various sub-committees held 235 meetings, of which 45 were at the Office of the Board and the remainder away from that centre.

**Changes in
work.**

5. An important change in the committee's work was decided upon by the Managers in February, when, as the result of consideration of a report presented by the General Purposes

* Local Government Board Orders dated 2nd April, 1897, 4th March, 1903, and 11th September, 1908.

Committee, they approved of the principle of the care of all grades of mentally defectives being entrusted to one committee, and of the transfer from the control of the children's committee to that of the asylums committee of the feeble-minded persons for whom they are authorised to make provision. The Managers also approved of the establishment of a separate colony at their institution at Darenth, henceforward to be known as Darenth Industrial Colony, for the accommodation of the feeble-minded cases hitherto provided for by this committee, and it is expected that the transfer will take place in the spring of 1912.

In our last report we adverted to the fact that although the number of children treated for ringworm at The Downs School had continued to increase the period of detention required had been so much shortened by reason of the introduction of X-ray treatment that a number of the beds were unoccupied, and that we should shortly be in a position to consider what use could be made of the accommodation at the school which was not required for ringworm cases. Early in the year now under review we submitted a report on the subject to the Managers, and, on our recommendation, they approved of the accommodation referred to being utilised for convalescent cases from the children's hospitals who would not require more medical care than could be afforded by a visiting medical officer, thereby making room at the latter institutions for fresh cases requiring the full care and treatment available there. With regard to the selection of cases to be received, two alternatives presented themselves. One was to use the school strictly as a convalescent institution for the sake of its bracing air, the children staying there, as a rule, for a comparatively short time, say four to six weeks. If this practice was adopted the cases would naturally be drawn principally from the Park Hospital, to which the school is far superior both as regards its surroundings and the facilities which it offers for outdoor exercise, whereas its situation possesses no advantages, from a health point of view, over Queen Mary's Hospital. The other was to make the opportunities for education which existed at the school the main factor, and to send children capable of being educated, with little regard to the possible length of stay or to the amount of medical treatment required. After carefully considering the various aspects of the question we approved of the principles (i.) that the vacant accommodation at the school should be used for strictly convalescent cases which might be expected so to benefit by the bracing air of the district as to be rendered fit to return to normal life after a short stay, and that such cases should be drawn mainly from the Park Hospital or admitted direct; and (ii.) that, as far as possible, no chronic cases or cases requiring a large amount of medical treatment should be admitted. Up to the present two blocks, containing in all 140 beds, have been allocated for these cases.

**Proportion of
poor law
children dealt
with.**

6. The numbers of metropolitan children (a) receiving indoor relief from the metropolitan boards of guardians, excluding those relieved as insane or as casual paupers, and (b) dealt with by the Board at the same dates were as follow :—

	(a)	(b)
On 1st January, 1907 ...	19,830	1,326
1st January, 1908 ...	20,474	1,370
1st January, 1909 ...	20,861	1,465
1st January, 1910 ...	21,321	2,354
1st January, 1911 ...	21,461	2,581
1st January, 1912 ...	*	3,132

* The return for 1st January, 1912, had not been issued at the date of the publication of this report.

Numbers for 1911.

7. The following figures give the numbers of children dealt with during the year, viz. :—

Number of inmates 1st January, 1911	2,663
Admitted during the year	5,793
Discharged „ „	5,030
Died „ „	210
Remaining 31st December, 1911 ...	3,216

Expenditure.

8. The gross expenditure out of general account on the children's institutions amounted for the year to £153,046. Including the original cost of Queen Mary's Hospital and the Park Hospital the total amount borrowed on loan was £946,340, of which £549,126 was outstanding at Michaelmas last. Details of the cost per head will be found in Appendix VIII.

Educational work.

9. The schools and homes in which the education of children is carried on were visited during the year by the Inspectors of the Board of Education and the following reports were received, viz. :—

(i.) The Downs School (20th February)—

The staff (which is the same as last year except that it has been reduced by one teacher, owing to the smaller attendance of children) continue to work assiduously and on good lines. The children in the upper classes, nearly all of whom have been admitted during the last six months, are brighter and more responsive than last year, although their attainments do not, of course, reach a high level. In needle-work the eldest girls should learn to cut out the simple garments which they make.

As the great majority of the "babies" attend during both morning sessions, there is less need in their class than in the other classes for repeating in the second session the lessons of the first session, and some of the lessons in the three "R's" might be replaced by story lessons and other occupations more suitable to young children. It is satisfactory to find that more opportunities for play are now given to these children.

(ii.) White Oak School (16th March)—

The work goes steadily on under skilful control, and the results produced in such difficult circumstances are surprisingly good.

The physical training, though carefully handled, is to a great extent spoilt by a misconception of the real purpose such training is intended to serve.

(iii.) High Wood School (23rd February)—

Excellent work is done in this school. Though the children are sometimes only here for a short time, there is a good school feeling, and they obviously much enjoy their time in school. The infants are excellently handled.

(iv.) S. Anne's Home (17th March)—

The children are evidently happy, and they do very well in their school subjects.

(v.) East Cliff House (16th March)—

The school is taught with great care and kindness and the children make progress while they are here.

It is, however, obvious that the teacher ought to have some help in the school-room. The present system of employing two of the elder girls to teach groups of the younger children is open to serious objection.

(vi.) Millfield (29th May)—

The accommodation has been improved by the erection of a folding partition. Discipline has improved and the schemes of work have been drawn up with care.

The appointment of a third teacher, especially in the summer, when one class is frequently taught in the open air, would make the organisation of the school easier.

Both the teachers appear to be doing their best for the children under their care.

Some new desks have been supplied.

The books provided for silent reading are much appreciated by the children. A further supply—more particularly for standard II—is needed.

Steps have been taken for the education of some of the older children at the Park Hospital, who are not acutely ill, but who are likely to remain in the hospital for some considerable time, including children affected with heart trouble. As a commencement two assistant schoolmistresses have been engaged, and reports which have been received on the working of the first few months give evidence of the eagerness with which the children avail themselves of the opportunity of acquiring knowledge. Delays which have occurred in the settlement of plans for the erection of classrooms at Queen Mary's Hospital are responsible for the fact that similar steps have not already been taken at that institution, but it is evident that the provision of educational facilities for suitable cases cannot be allowed to wait any longer, and that some temporary arrangements must be made in the matter.

Dietary.

10. In October the Managers approved of the permanent adoption of the revised dietary scale for children which had tentatively been in operation for some time previously. This scale does not apply to the cases in the two children's hospitals, and the question of settling a scale for these institutions is receiving our consideration.

Coronation celebrations.

11. In celebration of the coronation of His Majesty King George V. we sanctioned the provision of extra fare and expenditure on games, entertainments and decorations at the various institutions, and extra leave was granted to the staff.

Allocation of sick and convalescent cases.

12. We mentioned last year that we had intended, when the arrangements at Queen Mary's Hospital and the Park Hospital had assumed normal shape, to consider the question of treating these hospitals and the three institutions at the seaside as part of a general scheme for providing for the sick, debilitated and convalescent children of the metropolis, and of arranging for the suitable classification and interchange of children between all these institutions. We have found, however, that the question is attended with some difficulty, owing to the fact that practically all applications for admission to the three seaside institutions have been complied with, while it has only been possible to allot vacancies at the two hospitals in turn to the parishes and unions as they occur. In the meantime the practice has been for applications for admission received at the head office from day to day to be scrutinised there and the cases allocated by the clerk to the most suitable institutions, the Medical Officer for General Purposes being consulted in cases of doubt. Transfers between the several institutions are arranged in the same way, subject to the accommodation available and to the consideration of the reports received from the medical superintendent or medical officer of the institution from which the children are to be transferred. We find that this system has worked smoothly and successfully, and we propose that it should continue in force.

II.—SICK AND CONVALESCENT CHILDREN.

(a) QUEEN MARY'S HOSPITAL FOR CHILDREN.

Name of institution.

13. Early in the year the Board learned with much gratification that Her Majesty the Queen had graciously allowed her name to be associated with this institution, previously known as The Children's Infirmary, and the loyal and dutiful thanks of the Board were conveyed to Her Majesty for the kindly interest which she had been pleased to display in their work.

Numbers.

14. The number of children under treatment on the 1st January was 837 and on the 31st December 839. The admissions for the

year numbered 1,091, compared with 2,178 in 1910. The decrease in the number of children admitted was due to the fact that parts of the accommodation were temporarily closed during the year while extensive works in connection with the centralising of the heating and hot water services and extension of the gas service were being carried out.

Detailed statistics together with particulars of the medical work will be found in the report of the medical superintendent, Appendix II. (a) (1).

Additional buildings.

15. We mentioned in our last report that plans for the erection of small isolation wards for infectious diseases and for observation purposes, and of a hall for the use of patients and staff, together with some schoolrooms in which the education of those children who were likely to make a prolonged stay in the hospital might receive attention—proposals which had been approved by the Managers in November, 1909—were still awaiting the sanction of the Local Government Board. In May the plans were returned by that Board with a request that they should be further considered with a view of effecting a reduction in the estimated expenditure. The engineer-in-chief and the medical superintendent were requested to submit a joint report containing suggestions for revised schemes and the matter was still under consideration at the close of the year.

Other works.

16. The centralising of the heating and hot water services, and the extension of the gas service and extensive repairs to the roads were completed during the summer.

Other matters.

17. Other matters dealt with during the year included the establishment of a medical gymnasium for the treatment of cases of lateral curvature of the spine and other deformities, the appointment of a qualified massage sister to give treatment to paralysed and crippled cases, and also instruction to nurses, and the purchase of an additional motor vehicle for the distribution of food and stores.

(b) PARK HOSPITAL FOR CHILDREN.

Numbers.

18. This institution was transferred to the children's service in November, 1910, and contained 195 children at the commencement of 1911. During the past year 2,039 cases have been admitted, and 640 remained under treatment on the 31st December. The normal accommodation has been fixed at 800 beds. Detailed statistics, together with particulars of the medical work will be found in the report of the medical superintendent, Appendix II. (a) (2).

Works.

19. Various works necessitated by the altered use to which the hospital is now put have been carried out during the year. A well-equipped operating room has been provided, additional machinery has been installed in the laundry, and one of the airing courts has been altered experimentally with a view of providing better open air accommodation for children who are able to go out of doors.

Education.

20. Reference will be found in our opening section to arrangements which have been made for the education of suitable children.

(c) SEASIDE INSTITUTIONS.

Medical reports.

21. The reports of the medical officers of S. Anne's Home, East Cliff House, and Millfield will be found in Appendix II. (b).

Numbers. 22. The number of children admitted to these three institutions during the year amounted to 850, compared with 942 in 1910.

S. Anne's Home. 23. In October we received the resignation of the Rev. W. Laporte Payne, chaplain to the home, and the Rev. C. E. Stocks, M.A., who succeeded Mr. Laporte Payne as vicar of Herne Bay, was appointed in his place.

East Cliff House. 24. We mentioned last year that a site of about two acres immediately at the rear of the newer portion of this home, containing some old buildings known as Château Bellevue, had been purchased by the Managers, and that it was proposed to erect accommodation at least equivalent to that now contained in the original portion of the home, and to dispose of this portion, which is separated from the remainder of the institution by a public thoroughfare. The old buildings on the site have been demolished and cleared away, but pending consideration of questions affecting the Board's accommodation as a whole, plans of the new buildings have not yet been prepared.

Millfield. 25. Threatened encroachments of the sea on the Managers' boundary at Millfield have caused some anxiety, and in February it was agreed to co-operate with the owners of the adjoining property in the construction of an additional breastwork at the eastern end of the sea front.

III.—RINGWORM.

The Downs School-admissions. 28. The numbers of ringworm children dealt with during the year at The Downs School were :—

Remaining on 1st January, 1911	...	...	303	(44)
Discharged during the year	...	...	829	(97)
Died	..	..	1	(—)
Admitted	..	..	705	(75)
Remaining on 31st December, 1911	...	...	178	(22)

The numbers of admissions during the previous seven years and the numbers remaining under treatment at the end of each year were :—

	Admitted.				Remaining at end of year.			
*1904	619	(—)	...	...	569	(—)		
*1905	619	(24)	...	...	538	(19)		
1906	705	(20)	...	...	339	(18)		
1907	748	(68)	...	...	329	(24)		
1908	807	(43)	...	...	378	(29)		
1909	946	(105)	...	...	344	(42)		
1910	1,019	(125)	..	..	303	(44)		

Dermatologist's report. 27. The report of the dermatologist with detailed statistics will be found in Appendix III.

Accommodation for convalescents. 28. As foreshadowed in our last report, the decrease in the number of children at the school, owing to the shortened period of detention now required, enabled the Managers to divert part of the accommodation for the reception of convalescent cases, reference to which will be found in the first section of this report.

NOTE.—The numbers in brackets relate to extra-metropolitan cases.

* During the years 1904–5 ringworm children were also accommodated at Bridge School, Witham (160 beds). The numbers given are for both schools.

Period of detention. 29. The average stay of the first 100 children admitted to Bridge School after the opening in 1901 was 19 months. The stay from the beginning of X-ray treatment of the last 100 cases so treated at The Downs School prior to 31st December last is shown in the following table :—

Period.							Number.
1 to 2 months	...	...	...	...	...	...	14
2 to 4	„	...	...	...	...	...	48
4 to 6	„	...	...	...	...	...	32
6 to 8	„	...	...	...	...	...	5
8 to 10	„	...	...	...	...	...	1
							100

Average 3·6 months.

Works. 30. The admission of convalescent cases, and the reception of ringworm cases at a much younger age than formerly, necessitated additions to the heating arrangements, and in December the Managers approved of proposals which we submitted for augmenting the present system.

IV.—OPHTHALMIA.

Numbers. 31. The numbers of children dealt with during the year at the two ophthalmia schools, High Wood School, Brentwood, and White Oak School, Swanley, were :—

Remaining on 1st January, 1911	...	...	612	(33)
Discharged during the year	...	...	550	(26)
Died	„	„	2	(—)
Admitted	„	„	620	(25)
Remaining 31st December, 1911	...	...	680	(32)

The numbers admitted during the previous three years and those remaining under treatment at the end of each year were :—

	Admitted.					Remaining under treatment 31st December.	
1908	489	(11)	...	...	...	501	(25)
1909	642	(78)	...	...	...	551	(30)
1910	682	(34)	...	...	...	612	(33)

The percentage of trachoma cases to the total admissions for the past four years is stated by the ophthalmic surgeon to be as follows :—

1908	...	...	...	...	19·2 per cent.
1909	...	...	...	...	17·6 „ „
1910	...	...	...	...	17·0 „ „
1911	...	...	...	...	21·8 „ „

NOTE.—The numbers in brackets relate to extra-metropolitan children.

Period of detention. 32. The following statistics show the average period of detention in the ophthalmia schools, viz. :—

Months.

Average stay of first 100 cases admitted by the Board, 1903 ... 18·23

Average stay of last 100 cases discharged before 31st December,
1911 11·45

Average stay of the 110 trachoma cases discharged during 1911, 27
as follows :—

Period.						Number.
1 to 12 months	...	...	...	...	...	22
12 to 24	„	...	...	...	...	41
24 to 36	„	...	...	...	...	24
36 to 48	„	...	...	...	...	8
48 to 60	„	...	...	...	...	5
Over 60	„	...	...	...	...	10
						110

The average stay of the 90 trachoma cases discharged during 1910 was 28 months.

White Oak School. 33. The training of the elder boys at White Oak School in gardening work was again very successful, 17 boys being presented for the examination of the Royal Horticultural Society and all obtaining certificates. In 1910 the gas fittings at this school were overhauled and improved incandescent burners were installed, resulting in the saving of over a million cubic feet of gas during the succeeding twelve months.

High Wood School. 34. Towards the close of 1910 the continued use of some of the cottages at High Wood School for feeble-minded cases—a use which began when there was vacant accommodation at the school, and which was intended as a purely temporary arrangement—was causing considerable difficulty, and it was evident that steps would have to be taken at an early date to find other accommodation for these cases, and so free the school entirely for use as an ophthalmic institution. Fortunately the Fountain Hospital, at Tooting, was unoccupied, and was not required for the fever hospitals service, and, as a temporary expedient, and pending the carrying into effect of permanent measures for the classification of the feeble-minded to which we have referred previously, the Managers were able early in 1911 to arrange for the feeble-minded cases at High Wood School to be transferred to the hospital. The removal was effected in February.

There was a slight outbreak of measles in one of the groups of cottages in May, and 10 cases were removed to the Board's hospitals.

Medical report and statistics. 35. The report of the ophthalmic surgeon, with detailed statistics, will be found in Appendix IV.

V.—THE MENTALLY DEFECTIVE.

General.

36. We have already mentioned the decisions arrived at by the Board with regard to the re-classification of mentally defectives, which will involve the transfer of the cases under the Committee's care to the colony which has been established at Darenth, and the control of them to the Asylums Committee. Pending the completion of the arrangements for the change referred to the homes have been continued on existing lines, and particulars of the work will be found in the reports of the medical officer of the London homes (Miss R. Turner) and of the mental adviser at Bridge Industrial Home (Dr. Rotherham), Appendix V.

Colony at Fountain Hospital.

37. We have previously alluded to the transfer in February of the elder girls from the colony at High Wood School to the Fountain Hospital. Miss F. Harris, who had charge of them while at Brentwood was appointed as acting matron, and Miss R. Turner continued to act as medical officer for the mental side of the work, while an arrangement was made with the Asylums Committee for an assistant medical officer from the Board's neighbouring asylum at Tooting Bec to be available in case of necessity to attend to physical ailments. In October the medical officer reported that 21 of the inmates had so much improved that the Managers would not be justified in retaining them any longer, and arrangements were made for these cases to be discharged. Situations were found for several of them, and the remainder were returned either to the guardians to whom they were chargeable or to relatives.

Bridge Industrial Home.

38. Interesting details of the progress of the industries at Bridge Industrial Home will be found in Dr. Rotherham's report, Appendix V. During the summer the inmates' band performed once a month in the town recreation ground and also obtained paid engagements elsewhere. Dr. T. Douglas Turner, assistant superintendent of the Royal Eastern Counties Institution at Colchester made the following entry in the visitors' book at a visit paid on the 15th April :—

I have been very pleased and interested with all I have seen in this institution, and I think the work the boys do and the appearance of everything about the place reflect the greatest possible credit on the superintendent, matron, and other officers. I have never seen such splendid drill, and the band is beyond praise.

Lloyd House.

39. The lease of this home will expire in January, 1912, and in July last the Managers made arrangements to continue their occupation of the premises for the present on a yearly tenancy.

40. We would close our report with an expression of our appreciation of the services of the officers of every grade working under our control, whose efforts are devoted to the conscientious and efficient performance of the duties entrusted to them.

(Signed) R. WOOLLEY WALDEN,

Chairman.

APPENDICES.

- I. Particulars of hospitals, homes and schools.
- II. Sick, convalescent and debilitated children—reports of medical superintendents of Queen Mary's Hospital for Children and Park Hospital for Children, and of the medical officers of S. Anne's Home, East Cliff House, Millfield and The Downs School.
- III. Ringworm school—dermatologist's report.
- IV. Ophthalmia schools—ophthalmic surgeon's report.
- V. Homes for defective children—medical officers' reports.
- VI. Return of cases admitted from the several parishes and unions.
- VII. General statistical statement.
- VIII. Financial statement.

APPENDIX I.

PARTICULARS OF HOSPITALS, HOMES AND SCHOOLS.

- (i.) FOR SICK, CONVALESCENT AND DEBILITATED CHILDREN.
 - (a) INLAND.

1. **Queen Mary's Hospital for Children, Carshalton, Surrey.**—Site, about 136 acres. Purchased in July, 1896.

Accommodation, 850 beds, for sick, convalescent and debilitated children. This institution, formerly known as the Southern Hospital, was completed in 1906, and was originally intended for convalescent fever patients, but has never been used for this purpose. The control of this institution was transferred to the Children's Committee by the Board on the 12th September, 1908, to be used for the reception of the "sick, convalescent, and debilitated children," whom the Managers were authorised to make provision for by the Local Government Board's Order, dated 11th September, 1908. Opened 29th January, 1909, under the name of "The Children's Infirmary."

Medical Superintendent	...	...	W. T. Gordon Pugh, M.D., B.S.
Matron	...	...	Miss M. Winmill.
Steward	...	...	F. G. Hopgood.
Chaplain	...	...	Rev. G. B. Vaux, M.A.

2. **Park Hospital for Children, Hither Green, Lewisham, S.E.**—Site, about 20 acres. Purchased in June, 1893.

Accommodation, 800 beds, for sick, convalescent, and debilitated children. This institution, under the name of Park Fever Hospital, was opened for the reception of fever and diphtheria cases, in July, 1897. The Hospital was transferred to the Children's Committee by the Board on 16th July, 1910, for the accommodation of sick and debilitated children received under the Local Government Board's Order, dated 11th September, 1908, above quoted. Re-opened 14th November, 1910.

Medical Superintendent	...	...	R. A. Birdwood, M.D., M.R.C.S., M.A.
Matron	...	...	Miss S. A. Villiers.
Steward	...	...	H. Harrington.
Chaplain	...	...	Rev. J. A. Drummond, M.A., D.C.L.

3. **The Downs School, Sutton, Surrey.**—(Part of).

Two blocks at this institution (140 beds), are at present set aside for the accommodation of convalescent boys and girls, mostly transferred from the Park Hospital.

(b) SEASIDE.

1. **S. Anne's Home, Herne Bay, Kent.**—Purchased from the South Metropolitan School District Board with contents and taken over 26th December, 1897. (Originally established in 1874.)

There is a playground and a garden (in all, about $1\frac{3}{4}$ acres) at the rear of the house.

Accommodation, 134 children. Non-tubercular cases: all boys, and girls under 12 years of age.

Matron	...	...	...	Miss Elizabeth Palmer.
Medical Officer	...	...	...	C. K. Bowes, M.D., B.Ch., M.A.
Chaplain	...	...	...	Rev. C. E. Stocks, M.A.

2. **East Cliff House, Margate, Kent.**—Purchased from the Guardians of S. Pancras, with contents, and taken over 26th June, 1898. (Originally established 1895.)

There is a playground and a garden (in all, about $1\frac{1}{2}$ acres) at the rear of the house, on part of which two blocks, to hold 25 children each, have been erected. These were opened 13th September, 1901. An additional two acres of land at the rear of the house were purchased in January, 1910.

Accommodation, 130 children. Non-tubercular cases, girls over 12 years of age; all cases of tubercular bones and glands (surgical cases).

Matron	...	...	...	Miss Emily K. Jacob.
Medical Officer	...	...	...	W. G. Sutcliffe, F.R.C.S.

3. **Millfield, Rustington, near Littlehampton, Sussex.**—Site, $5\frac{1}{2}$ acres.

Accommodation, 120 children. Early cases of pulmonary tuberculosis of both sexes. Opened 6th April, 1904.

Matron	...	...	...	Miss E. Firth.
Medical Officer	...	...	...	C. E. Last, M.R.C.S., L.R.C.P.
Chaplain	...	...	...	Rev. J. L. Crosland.

(ii.) RINGWORM SCHOOL.

The Downs School, Sutton, Surrey.—Purchased from the South Metropolitan School District Board, by whom the school was erected in 1882. Site, 20 acres. Possession given June, 1902.

Accommodation, 420 children	...	Opened 26th February, 1903.
Visiting Dermatologist	...	T. Colcott Fox, M.B., F.R.C.P.
Matron	...	Miss Emily Turton.*
Assistants to the Dermatologist	H. G. Adamson, M.D., and H. G. Critchley, M.D.	
Visiting Medical Officer	...	G. Rice, M.B., C.M.
Chaplain	...	Rev. C. C. Taylor, B.A.

140 beds not required for ringworm cases have been set aside for convalescent children. (See above).

* Left the service on 25th March, 1912. Miss E. D. Hancock has been appointed as her successor.

(iii.) OPHTHALMIA SCHOOLS.

1. **White Oak School, Swanley, Kent.**—Site, 49 acres.
Accommodation, 360 children ... Opened 20th March, 1903.
Visiting Ophthalmic Surgeon ... E. Treacher Collins, F.R.C.S.
Matron Miss E. D. Lynch.
Assistant Medical Officer ... W. J. Thomas, M.R.C.S., L.R.C.P.,
D.P.H.
Chaplain Rev. A. W. F. T. De Spailier.

2. **High Wood School, Brentwood, Essex.**—Site, 28 acres.
Accommodation, 360 children ... Opened 26th July, 1904.
Visiting Ophthalmic Surgeon ... E. Treacher Collins, F.R.C.S.
Matron Miss Emily Baker.
Assistant Medical Officer ... F. A. C. Tyrrell, M.B., B.C., F.R.C.S.
Chaplain Rev. C. F. Newton, M.A.

(iv.) HOMES FOR DEFECTIVES.

1. **Lloyd House, 11, Lloyd Street, Pentonville, W.C.**—Opened 16th January, 1899.
Accommodation, 20 girls of defective intellect.

2. **12, Lloyd Street, Pentonville, W.C.**—Opened 18th October, 1901.
Accommodation, 8 girls of defective intellect.
The children from both homes attend the special classes for the mentally defective at the Hugh Myddelton County Council School, Clerkenwell Close E.C.
Matron for both Homes, Miss Annie Green.

3. **26, Elm Grove, Peckham, S.E.**—Opened 25th January, 1901.
Accommodation, 15 boys of defective intellect.
The children attend the special classes at the Victoria Road County Council School, Peckham.
House-mother, Mrs. E. J. Whiddett.

4. **81, Earlsfield Road, Wandsworth, S.W.** Opened 7th July, 1903.
Accommodation, 10 girls of defective intellect.
The children attend the special classes at the Garratt Lane County Council School, Duntshill, S.W.
House-mother, Miss E. Shepherd.

5. **Surrey House, 66, S. Ann's Hill, Wandsworth, S.W.**—Opened 11th December, 1903.
Accommodation, 20 boys of defective intellect.
The children attend the special classes at the Frogmore County Council School.
House-mother, Mrs. Timbrell.
Medical Officer for the above five homes, Miss Rose Turner, L.R.C.P., L.R.C.S., L.F.P.S.

6. **Fountain Hospital, Tooting Grove, Tooting Graveney, S.W.**
This institution was used during the year 1911, for the accommodation of elder female feeble-minded girls transferred from High Wood School, in February.
Acting Matron, Miss F. Harris.
Medical Officer for mental work, Miss Rose Turner. (See above).

7. **Bridge Industrial Home, Witham, Essex.**—Purchased with contents from the South Metropolitan School District Board in January, 1901. It was originally a workhouse, but has been used as a school for the past 28 years. From the time of purchase by the Managers until the 25th March, 1906, it was used for the accommodation of children suffering from ringworm and was re-opened on the 6th June, 1906, as a working colony for elder male feeble-minded cases. Site, $7\frac{1}{4}$ acres. Ten acres of land at the rear of the home are rented on lease to provide farming work for the inmates.

Accommodation, 210.

Mental Specialist, A. Rotherham, M.B., B.C., M.A.

Medical Officer, K. C. Gimson, M.B., B.C.

Superintendent, T. C. Gibbs.

NOTE.—The Managers have decided, with the approval of the Local Government Board, to transfer from the control of the Children's Committee to that of the Asylums Committee, the feeble-minded cases hitherto accommodated in the above-named institutions, and preparations were being made at the close of the year for giving effect to this decision.

APPENDIX II.

INSTITUTIONS FOR SICK, CONVALESCENT, AND
DEBILITATED CHILDREN.

(a) INLAND.

(1.) QUEEN MARY'S HOSPITAL FOR CHILDREN, CARSHALTON.

REPORT OF THE MEDICAL SUPERINTENDENT.

4th March, 1212.

Statistics.

During the year 1,928 patients were treated in this institution. 1,091 were admitted ; 848 were discharged ; 162 were transferred to other institutions of the Board, and 79 died. There remained in hospital at the end of the year 839 patients. The diminution in the number admitted was due to the closing of sections of the hospital during the summer necessitated by the installation of a new heating system.

Admissions.

The following table indicates the age of the children and the parishes from which they were received.

TABLE I.

Parish or union.	Under 1 year.	1—2 years.	2—3 years.	3—8 years.	8—12 years.	Over 12 years.	Total under 3 years.	Total over 3 years.	Grand Total.
Bermondsey ...	1	7	3	10	6	3	11	19	30
Bethnal Green ...	7	12	5	18	9	13	24	40	64
Bloomsbury ...	—	—	—	—	—	—	—	—	—
Camberwell ...	1	2	2	11	8	6	5	25	30
Chelsea ...	—	1	2	2	1	—	3	3	6
Fulham ...	5	11	9	14	15	16	25	45	70
George's, S. ...	6	4	2	11	5	5	12	21	33
George, S.-in-the-East	10	18	6	15	5	6	34	26	60
Greenwich ...	—	3	—	14	9	10	3	33	36
Hackney ...	1	2	1	17	14	19	4	50	54
Hammersmith ...	1	9	6	5	4	6	16	15	31
Hampstead ...	2	4	4	6	1	—	10	7	17
Holborn ...	—	—	2	9	10	15	2	34	36
Islington ...	3	6	11	23	13	11	20	47	67
Kensington ...	1	6	2	7	2	3	9	12	21
Lambeth ...	8	14	10	30	17	13	32	60	92
Lewisham ...	—	1	—	5	6	6	1	17	18
London, City of ...	—	—	—	—	—	—	—	—	—
Marylebone, S. ...	7	9	2	13	6	1	18	20	38
Mile End ...	5	5	1	7	11	3	11	21	32
Paddington ...	6	6	3	10	2	1	15	13	28
Pancras, S. ...	5	9	8	23	11	9	22	43	65
Poplar... ...	2	4	4	10	6	3	10	19	29
Shoreditch ...	4	5	5	8	4	3	14	15	29
Southwark ...	2	11	6	15	12	6	19	33	52
Stepney ...	4	9	—	3	6	4	13	13	26
Strand ...	—	—	—	1	1	1	—	3	3
Wandsworth ...	9	15	12	20	8	11	36	39	75
Westminster ...	—	—	1	—	—	—	1	—	1
Whitechapel ...	2	13	4	5	2	1	19	8	27
Woolwich ...	—	—	—	4	5	4	—	13	13
Croydon ...	—	—	—	—	—	1	—	1	1
Derby ...	—	—	—	—	—	1	—	1	1
Edmonton ...	—	—	—	2	—	—	—	2	2
Ipswich ...	—	—	—	—	—	1	—	1	1
Kingston-upon-Hull...	—	—	—	—	—	1	—	1	1
St. Faith's, Norwich...	—	—	—	—	—	1	—	1	1
Watford ...	—	—	—	—	—	1	—	1	1
Total ...	92	186	111	318	199	185	389	702	1,091

Diseases. The diseases as stated on the admission orders are enumerated below :—

TABLE II.
A.—SURGICAL.

TUBERCULAR DISEASE—				Brought forward	..	231
Spine	41	DIGESTIVE SYSTEM—				
Hip	50	Cancrum oris	1			
Knee	10	Pyorrhœa alveolaris	1			
Ankle	6	Prolapsus ani	2			
Foot	5	Ischio-rectal abscess	1			
Shoulder	1	Appendicitis	3			
Elbow	2	Hernia, inguinal	6			
Fingers	4	„ umbilical	4			
Rib	2	GENITO-URINARY SYSTEM—				
Bone	3	Vaginitis	3			
Kidney	1	Phimosis	1			
Skin (including lupus) ..	12	Hydrocele	1			
Cervical glands	45	Varicocele	3			
DISEASES OF BONE—				DISEASES OF THE EYE—		
Necrosis (various)	4	Symblepharon	1			
Osteomyelitis	4	Blepharitis	4			
Periostitis	2	Strabismus	1			
Osteomalacea	1	Conjunctivitis	2			
Fractures	7	Corneal ulcer	3			
DISEASES OF JOINTS—				Interstitial keratitis.. ..	3	
Ankylosis	1	Iritis	1			
Septic arthritis	1	Cataract	1			
DEFORMITIES—				Abscess of nasal duct	1	
Spinal curvature	11	Obstruction of lachrymal duct	1			
Talipes	1	DISEASES OF THE EAR—				
Epispadias	1	Otorrhœa	66			
RESPIRATORY SYSTEM—				Mastoid disease	4	
Hypertrophy of tonsils ..	8	Lateral sinus thrombosis ..	1			
Adenoids	6	GENERAL—				
Empyema	2	Deviated nasal septum	1			
Carried forward				Von Recklinghausen's disease	1	
	231	Pyæmia	1			
		Scalds	2			
		Abscesses (various)	9			
		Total	360			

B.—MEDICAL.

TUBERCULAR DISEASE—				Brought forward	..	136
Lungs	121	DISEASES OF METABOLISM—				
Abdominal	8	Marasmus	70			
Meningeal	1	Anæmia	28			
General	6	Debility (after various diseases)	153			
Carried forward				Carried forward	..	387
	136					

CHILDREN'S COMMITTEE.

33

Brought forward ..	387	Brought forward ..	581
RESPIRATORY SYSTEM—		Hydrocephalus ..	1
Bronchitis	39	Meningitis	1
Pleurisy	6	Eclampsia	2
CIRCULATORY SYSTEM—		Hemiplegia	1
Valvular disease	33	Spastic diplegia	1
Congenital heart disease ..	1	Infantile paralysis	6
Pericarditis	1	Pseudo-hypertrophic paralysis	1
		Facial paralysis	1
DIGESTIVE SYSTEM—		DISEASES OF THE SKIN—	
Stomatitis	6	Scabies	1
Gastric ulcer	1	Eczema	28
Enteritis	23	Impetigo	21
Epidemic diarrhoea	62	Seborrhœa of scalp	4
URINARY SYSTEM—		Furunculosis	1
Enuresis	1	Purpura	3
Nephritis	2	Psoriasis	4
Albuminuria	1	Urticaria	1
NERVOUS SYSTEM—		Erythema nodosum	1
Chorea	15	Chilblains	1
Epilepsy	1	GENERAL—	
Infantalism	1	Rheumatism	15
Mental deficiency	1	Whooping cough	1
Carried forward ..	581	Hæmophilia	1
		Rickets	47
		Congenital syphilis	7
		Total	731
		Grand total	1,091

Operations. 140 operations under anæsthetics were performed during the year. They included operations on tubercular joints, 19 (hip, 15; knee, 1; elbow, 3); on tubercular bones, 12 (tibia, 2; ilium, 1; rib, 2; metatarsus, 4; toe, 1; finger, 1; jaw, 1); for psoas abscess, 4; for varicocele, 4; radical cure of hernia, 4; appendicectomy, 3; mastoidectomy, 2; for enlarged tonsils, 16; for adenoids, 16; amputations, 2 (forearm, 1; toe, 1); and the remaining 58 were operations for abscesses, sebaceous cysts, onychia, sequestra, deviation of nasal septum, tracheotomy, suture of nerve, cystoscopic examination and lateral sinus thrombosis.

Complicating infectious diseases. 20 cases of scarlet fever and 6 of diphtheria occurred among the patients. Several cases of measles, German measles, chicken-pox and whooping cough also developed.

Deaths. 79 deaths occurred, a mortality of 7·2 per cent. The causes of death were as follow:—Tuberculosis, 30 (general, 3; pulmonary, 14; meningeal, 3; abdominal, 4; hip, 2; spine, 4); diphtheria, 1; measles, 1; pertussis, 1; lupus vulgaris, 1; chronic enteritis, 7; epidemic diarrhoea, 6; marasmus, 10; basic meningitis, 1; eclampsia, 2; lateral sinus thrombosis, 1; hydrocephalus, 2; heart disease, 7; chronic nephritis, 1; broncho-pneumonia, 8.

(Signed)

W. T. GORDON PUGH,

Medical Superintendent.

(2) *PARK HOSPITAL FOR CHILDREN, HITHER GREEN, S.E.*

REPORT OF THE MEDICAL SUPERINTENDENT.

8th January, 1912.

On the 31st December, 1910, there were 195 remaining in hospital; 2,039 were admitted during 1911, 393 were transferred to other hospitals of the Board, 1,088 were discharged, 113 died, leaving 640 in hospital at the end of the year.

The hospital death-rate was 6.22 for every hundred patients treated, the calculation being made according to the formula in use in the Board's isolation service. More than half the patients were under 3 years of age and out of this number one quarter were under a year old.

S. Marylebone sent most, 174; including 107 under 3 years. Two of their patients died, both under three.

Hammersmith sent the least, 8.

The parish and age table is instructive, as it shows the different use the several Guardians' Boards have made of the Managers' accommodation.

* * * * *

The number of days maintenance has been 206,884. This gives an average stay in hospital of 92 days for each patient.

* * * * *

(Signed) R. A. BIRDWOOD,
Medical Superintendent.

APPENDICES.

TABLE 1.

ADMISSIONS, PARISHES AND AGE.

Parish.	Under 1 year.	1—2 years.	2—3 years.	3—8 years.	8—12 years.	Over 12 years.	Total under 3 years.	Total over 3 years.	Grand Total.
Bermondsey ..	11	22	11	18	17	6	44	41	85
Bethnal Green ..	16	24	17	28	28	8	57	64	121
Camberwell ..	4	19	17	34	16	5	40	55	95
Chelsea ..	1	4	8	3	5	1	13	9	22
Fulham ..	14	42	19	31	19	10	75	60	135
George's, S. ..	7	14	10	17	8	1	31	26	57
George, S.-in-the-E.	10	15	7	3	3	1	32	7	39
Greenwich ..	—	12	15	7	8	1	27	16	43
Hackney ..	—	12	11	27	33	18	23	78	101
Hammersmith ..	2	3	—	1	2	—	5	3	8
Hampstead ..	4	4	2	2	1	—	10	3	13
Holborn ..	1	1	4	21	22	6	6	49	55
Islington ..	28	29	16	36	22	4	73	62	135
Kensington ..	6	26	10	30	20	9	42	59	101
Lambeth ..	21	33	13	17	12	7	67	36	103
Lewisham ..	—	5	1	20	8	1	6	29	35
Marylebone, S. ..	36	49	22	47	17	3	107	67	174
Mile End ..	—	3	2	8	4	6	5	18	23
Paddington ..	34	20	13	19	5	8	67	32	99
Pancras, S. ..	14	24	10	25	19	4	48	48	96
Poplar ..	22	56	25	9	3	—	103	12	115
Shoreditch ..	5	1	3	3	3	1	9	7	16
Southwark ..	2	27	15	25	20	9	44	54	98
Stepney ..	14	23	16	7	2	3	53	12	65
Wandsworth ..	8	38	17	11	22	3	63	36	99
Westminster ..	1	6	2	1	1	—	9	2	11
Whitechapel ..	12	24	13	11	14	6	49	31	80
Woolwich ..	5	5	1	1	3	—	11	4	15
	278	541	300	462	337	121	1,119	920	2,039

TABLE II.

DEATHS.

Parish.	Under 1 year.	1—2 years.	2—3 years.	3—8 years.	8—12 years.	Over 12 years.	Total under 3 years.	Total over 3 years.	Grand Total.
Bermondsey ..	5	2	1	3	1	—	8	4	12
Bethnal Green ..	4	—	—	—	—	1	4	1	5
Camberwell ..	—	—	1	—	—	—	1	—	1
Fulham ..	5	2	1	—	—	—	8	—	8
George's, S. ..	3	1	—	—	—	—	4	—	4
George, S.-in-the-E.	4	—	—	—	—	—	4	—	4
Greenwich ..	—	1	—	—	1	—	1	1	2
Hackney ..	—	1	1	—	—	—	2	—	2
Hampstead ..	1	—	—	—	—	—	1	—	1
Islington ..	3	2	—	2	—	—	5	2	7
Kensington ..	—	1	—	—	—	—	1	—	1
Lambeth ..	3	5	—	—	—	—	8	—	8
Lewisham ..	—	—	—	1	1	—	—	2	2
Marylebone, S. ..	1	1	—	—	—	—	2	—	2
Mile End ..	—	—	—	—	—	1	—	1	1
Paddington ..	8	3	1	—	—	—	12	—	12
Pancras, S. ..	1	1	1	2	—	—	3	2	5
Poplar ..	11	4	1	—	—	—	16	—	16
Southwark ..	—	1	—	—	—	—	1	—	1
Stepney ..	4	3	—	—	—	—	7	—	7
Wandsworth ..	—	3	1	—	—	—	4	—	4
Whitechapel ..	1	2	—	—	—	—	3	—	3
Woolwich ..	1	—	—	—	—	—	1	—	1
Shoreditch ..	3	1	—	—	—	—	4	—	4
	58	34	8	8	3	2	100	13	113

TABLE III.

DISEASES ON ADMISSION TO THE HOSPITAL.

DISEASES OF THE RESPIRATORY SYSTEM—				DISEASES OF THE EYE—			
Broncho-pneumonia	..	106		Conjunctivitis	..	..	7
Lobar-pneumonia	..	98		Injury to cornea	..	..	1
Bronchitis	..	169		Corneal ulcers	..	..	2
Pleurisy	..	3		DISEASES OF BONES AND JOINTS—			
Pleural effusion	..	2		Tuberculosis of knee joint	..		2
Empyema	..	6		Tubercular hip disease	..		3
Laryngitis	..	1		Disease of elbow joint	..		1
DISEASES OF THE NOSE—				Spinal curvature	..	..	4
Adenoids	..	12		Necrosis of jaw	..	..	1
Rhinorrhœa	..	3		Synovitis	..	..	1
DISEASE OF CIRCULATORY SYSTEM—				Spinal caries	..	..	5
Heart disease	..	73		DISEASE OF THE EAR—			
Anæmia	..	123		Otorrhœa	..	..	102
DISEASES OF DIGESTIVE SYSTEM—				DISEASES OF THE SKIN—			
Stomatitis	..	13		Eczema	..	..	60
Glossitis	..	1		Impetigo	..	..	51
Tonsillitis	..	15		Scabies	..	..	7
Enteritis	..	73		Nettle rash	..	..	1
Peritonitis	..	1		Urticaria	..	..	3
Tubercular peritonitis	..	3		Dermatitis	..	..	5
Appendicitis	..	5		Seborrhœa	..	..	3
Jaundice	..	1		CONVALESCENT FROM INFECTIOUS DISEASES—			
Prolapsus ani	..	11		Measles	..	..	73
Diarrhœa	..	47		Whooping cough	..	..	32
CONSTITUTIONAL DISEASES—				Enteric fever	..	..	1
Rheumatism	..	27		Typhoid	..	..	3
Rickets	..	107		Chickenpox	..	..	6
Marasmus	..	273		Diphtheria	..	..	8
Debility	..	284		Erysipelas	..	..	2
Tubercular diathesis	..	1		Influenza	..	..	2
DISEASES OF NERVOUS SYSTEM—				FRACTURES—			
Paralysis	..	14		Fractured femur	..	..	4
Paraplegia	..	3		„ tibia	..	..	2
Hemiplegia	..	1		„ arm and thigh	..	..	1
Chorea	..	39		UNCLASSIFIED DISEASES—			
Tabes dorsalis	..	1		Burns	..	..	10
Diplegia	..	3		Abscesses	..	..	29
Meningitis	..	3		Cough	..	..	1
Epilepsy	..	4		Adenitis	..	..	32
Hydrocephalus	..	3		Hernia	..	..	2
Spina bifida	..	2		Cleft palate	..	..	1
Convulsions	..	1		Cellulitis	..	..	6
GENITO-URINARY DISEASES—				Ulcer of arm	..	..	1
Nephritis	..	5		Scalp wound	..	..	1
Cystitis	..	1		Removal of tumour from forehead	..	..	1
Vulvitis	..	4		Fractured upper jaw	..	..	1
Syphilis	..	2					
Congenital syphilis	..	12					
Incontinence of urine	..	5					

TABLE IV.
REPORT ON LABORATORY WORK.

Cultures of nasal discharge	..	..	..	..	..	..	..	507
Cultures of throat	..	..	..	..	..	..	..	268
Cultures, etc., of vaginal discharge	..	..	..	..	..	..	..	32
Other bacteriological examinations	..	..	..	..	..	..	..	57
Blood counts	..	..	..	..	..	..	5	
Blood cultures	..	..	..	..	..	..	2	
Widal reactions	..	..	..	..	..	..	6	
Wassermann reactions	..	..	..	..	..	..	4	
							—	17
Chemical examinations—								
Urines	..	..	..	..	..	..	44	
Vomits, etc.	..	..	..	..	..	..	8	
							—	52
Sputa	..	..	..	..	..	..	..	27
Hair for ringworm	..	..	..	..	..	..	..	42
Pathological sections	..	..	..	..	..	..	..	3
								—
							Total	1,005
						
								—

TABLE V.

TOTAL GENERAL ANÆSTHETICS IN HOSPITAL FOR YEAR 1911.

For surgical operations	..	..	..	..	..	..	..	135
For dental operations	..	..	..	..	..	..	..	83
								—
							Total	218
						
								—

(3) *THE DOWNS SCHOOL, SUTTON.*

REPORT OF THE MEDICAL OFFICER.

3rd May, 1912.

I beg to submit a few particulars concerning the convalescent children. The first admissions took place on the 11th May, 1911, and up to and including the 31st of December, 1911, 242 were admitted and 110 discharged. The average stay was about three months, and in the majority of cases the progress was very satisfactory. The children were carefully weighed on the day of admission and weekly afterwards, and with one or two exceptions the gain in weight was above the average. Ringworm of the scalp was detected in 5 cases when being examined for admission, and these were immediately transferred to the blocks devoted to that disease. One child developed acute conjunctivitis and was transferred to White Oak and there were one or two cases of serious illness. A few cases of chicken pox occurred among some new admissions, but on the whole a good standard of health has been maintained and the children have benefited by being able to be so much in the air of the downs.

(Signed) GEO. RICE,
Visiting Medical Officer.

(b) SEASIDE.

(1) *S. ANNE'S HOME, HERNE BAY.*

REPORT OF THE MEDICAL OFFICER.

30th March, 1912.

I beg to report as follows on the work done at the home during the year 1911 :—

Number of children in the home on the 31st December, 1910 ..	134
„ „ „ admitted during the year 1911	364
„ „ „ discharged during the year 1911	360
„ „ „ who died during the year 1911	5
Remaining in the home on the 31st December, 1911	133

The work done during the year has been of the same kind as in previous years, consisting chiefly of the treatment of convalescents from acute illness, but we have had rather a larger number of cripples than usual. We had 3 outbreaks of chicken-pox during the year but we had no difficulty in dealing with the cases in spite of the fact that we have no isolation block. No cases of ophthalmia occurred, but 12 cases of ringworm were transferred to The Downs School.

Of the 5 children who died, 2 were cases of chronic heart disease, one a case of tubercular disease of the spine, one a case of chronic meningitis, and the fifth was a case of tuberculosis. This last case was an interesting one. He was a boy who was admitted with chronic pleurisy, which was probably of tubercular origin; after some months he developed a sub-diaphragmatic abscess, this abscess was opened and drained, but a few weeks after he was suddenly seized with an acute attack of diarrhoea and collapsed and died in a few minutes.

(Signed) C. K. BOWES, M.D.,
Medical Officer.

(2) *EAST CLIFF HOUSE, MARGATE.*

REPORT OF THE MEDICAL OFFICER.

January, 1912.

The number of children treated, 491, shews a slight decrease on preceding years.

Cases of surgical tuberculosis continue to do exceedingly well, and the Guardians might with advantage utilise the excellent opportunities provided for the treatment of this type of disease to a much greater extent than has been the case up to the present. The large verandah where children are kept constantly in the open air offers a means of insuring an almost certain cure with little or no deformity for diseases of the joints and spine, provided that they come under notice at a sufficiently early stage. In fact the Board's institutions have a very great advantage over voluntary hospitals in that they are able to retain their cases for an almost unlimited period of time. Several cases of spinal, hip and knee joint disease have been discharged cured after stays varying from six months to four years, and as they have been under observation for the whole time, the deformity and consequent limiting of earning capacity has been reduced to a minimum. Tuberculous glands have been excised when necessary, but many have disappeared entirely under the excellent climatic influences.

Some 36 operations have been performed under anæsthetics, including one excision of the knee joint, two cases of mastoid disease, and 12 excisions of tuberculous glands. Several abscesses of the spine and hip joint have been dealt with, a few of the latter by aspiration without general anæsthetic. The systematic treatment of sinuses by injection with Beck's bismuth method is producing excellent results.

(Signed) W. G. SUTCLIFFE, F.R.C.S. (*Eng.*),
Medical Officer.

(3) *MILLFIELD, RUSTINGTON.*

REPORT OF THE MEDICAL OFFICER.

January, 1912.

During the year 1911 there have been 126 admissions, 124 discharges and 2 deaths, leaving 120 children under treatment.

The discharges were as follows :—89 satisfactory, 3 to The Downs School, 5 over-age, 2 at request of Guardians, 2 for minor surgical treatment, and 23 unfavourable, of whom 11 were transferred to Queen Mary's Hospital.

The children continue to do well, and some cases of a more advanced type have shown unexpected improvement.

(Signed) CECIL E. LAST,
Medical Officer.

APPENDIX III.

RINGWORM SCHOOL.

THE DOWNS SCHOOL, SUTTON, SURREY.

REPORT OF THE VISITING DERMATOLOGIST.

February, 1912.

On January 1st, 1911, there remained in the school 303 children and in addition 705 were admitted, making a total of 1,008 to be accounted for in the year 1911. There were 829 children discharged and one died. Included in these discharges were 47 children (33 cured and 14 not so), sent to other of the Boards institutions on account of infective disease; another 17 were discharged at the request of the Guardians (12 cured and 5 not yet X-rayed). Thus 178 children only remained on January 1st, 1912, of those admitted for ringworm.

The two tables I herewith submit set forth respectively (1) the parish or union to which the children were chargeable, the sex, and the result of my diagnosis; (2) the age and sex of the children. The term "undetermined" in table I. is adopted to include a motley collection of cases, some of which were certainly not ringworm, though others had probably suffered and been treated and practically cured when coming under my observation. It will be noted that I have ceased to distinguish two great types of ringworm met with. I am happy to say the reason is that one very insidious type of ringworm is now quite exceptional in the cases admitted to the Downs School. It is to be observed that a majority of ringworm cases are now of recent infection, compared with those of former years; and young children predominate.

(Signed) T. COLCOTT FOX.

TABLE I.
ADMISSIONS TO THE DOWNS SCHOOL DURING 1911.

Parish or Union.	Ringworm.		Undeter- mined.		Alopecia.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.
Bermondsey	4	3	1	1	..	..	5	4
Bethnal Green	6	11	3	4	1	..	10	15
Camberwell	14	15	3	4	..	..	17	19
Chelsea	2	7	1	2	..	..	3	9
Edmonton	9	6	2	1	..	..	11	7
Fulham	4	5	..	..	..	..	4	5
George's, S.	10	9	1	2	..	..	11	11
George, S.-in-the-East	3	3	2	1	..	..	5	4
Greenwich	2	4	..	..	..	..	2	4
Hackney	13	24	3	8	..	..	16	32
Ham, West	8	7	2	2	..	..	10	9
Hammersmith	3	4	2	..	..	..	5	4
Hampstead	2	3	1	1	..	..	3	4
Holborn	7	2	2	..	..	..	9	2
Islington	26	20	6	3	..	..	32	23
Kensington	15	17	7	3	1	..	23	20
Lambeth	16	12	7	2	1	1	24	15
Lewisham	18	10	4	2	..	..	22	12
London, City of	2	..	..	..	..	..	2	..
Marylebone, S.	6	13	3	4	..	..	9	17
Mile End	9	6	4	3	1	..	14	9
Paddington	5	2	1	1	..	..	6	3
Pancras, S.	10	6	1	3	..	..	11	9
Poplar	5	3	3	1	..	..	8	4
Shoreditch	7	5	4	3	..	..	11	8
Southwark	20	11	3	2	..	..	23	13
Stepney	4	1	2	..	..	..	6	1
Strand	3	..	..	..	..	..	3	..
Wandsworth	37	32	6	8	..	..	43	40
Watford	3	2	2	..	..	..	5	2
Westminster	2	..	2	..	..	..	4	..
Whitechapel	1	5	..	..	..	..	1	5
Woolwich	2	7	..	..	..	..	2	7
L.C.C. .. .. .	..	3	..	..	..	..	..	3
Brentford	7	8	4	..	..	..	11	8
Bosmere and Claydon	1	1	2	..	..	..	3	1
Hartismere	1	..	..	1	..	..	1	1
	287	267	84	62	4	1	375	330
TOTAL	554		146		5		705	

TABLE II.
AGES OF CHILDREN ADMITTED WITH RINGWORM.

Age in years.	Ringworm.		Undetermined.		Alopecia.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.
1	9	9	1	1	..	..	10	10
2	24	26	6	5	..	..	30	31
3	30	37	6	8	..	..	36	45
4	36	36	8	8	..	..	44	44
5	31	26	6	6	..	1	37	33
6	34	28	9	5	..	..	43	33
7	36	25	12	7	..	..	48	32
8	30	24	13	6	..	..	43	30
9	19	22	4	3	1	..	24	25
10	10	14	4	7	1	..	15	21
11	17	8	4	4	..	..	21	12
12	5	3	4	1	..	..	9	4
13	1	7	4	..	1	..	6	7
14	5	2	1	1	1	..	7	3
15	..	..	2	..	..	..	2	..
	287	267	84	62	4	1	375	330
	554		146		5		705	

APPENDIX IV.

OPHTHALMIA SCHOOLS.

REPORT OF THE VISITING OPHTHALMIC SURGEON.

*January, 1912.**WHITE OAK SCHOOL, SWANLEY.*

There were 344 children left in the school at the end of 1910.

During the year 1911, 320 have been admitted.

The affections of the eyes from which these children were suffering may be classified as follows :—

Trachoma..	..	..	..	..	47
Follicular conjunctivitis	..	..	..	..	23
Mucopurulent ophthalmia	..	..	..	..	45
Chronic conjunctivitis	..	..	..	..	167
Phlyctenular ophthalmia	..	..	..	..	14
Lacrymal obstruction	..	..	..	..	2
Marginal blepharitis	..	..	..	..	22
286 children have been discharged cured.					
Trachoma..	..	..	..	..	64
Follicular conjunctivitis	..	..	..	..	30
Mucopurulent ophthalmia	..	..	..	..	38
Chronic conjunctivitis	..	..	..	..	122
Phlyctenular ophthalmia	..	..	..	..	14
Marginal blepharitis	..	..	..	..	18

26 children have been removed by order of the Guardians before they were cured.

6 children were transferred to High Wood School suffering from ringworm.

1 child was transferred to Queen Mary's Hospital with thrombosis of the lateral sinus.

1 child was transferred to Brook Hospital suffering from measles.

2 children absconded.

342 children were left in the school at the end of the year.

HIGH-WOOD SCHOOL, BRENTFORD.

There were 268 children left in the school at the end of 1910.

During the year 1911, 300 children have been admitted.

The affections of the eyes from which these children were suffering may be classified as follows :—

Trachoma..	..	..	..	..	88
Follicular conjunctivitis	..	..	..	..	24
Mucopurulent conjunctivitis	..	..	..	..	43
Chronic conjunctivitis	..	..	..	..	116
Phlyctenular ophthalmia	..	..	..	..	17
Marginal blepharitis	..	..	..	..	7
Discharging socket	..	..	..	..	1
Lacrymal obstruction	..	..	..	..	4

189 children have been discharged cured.

Trachoma.. .. .	66
Follicular conjunctivitis	10
Mucopurulent conjunctivitis	27
Chronic conjunctivitis	75
Phlyctenular ophthalmia	7
Marginal blepharitis	3
Lacrymal obstruction	1

37 children were removed by order of the Guardians before they were cured.

2 children were discharged uncured being over age.

2 children died, one of pulmonary tuberculosis and the other of meningitis.

338 children were left in the school at the end of the year.

The following table shows the number of trachomatous and non-trachomatous cases admitted into each of the schools from the different parishes and unions :—

Parish or Union.	Non-Trachoma.		Trachoma.		Total.	
	White Oak School.	High Wood School.	White Oak School.	High Wood School.	White Oak School.	High Wood School.
Bermondsey	10	1	1	2	11	3
Bethnal Green	7	5	—	3	7	8
Camberwell	16	9	3	—	19	9
Chelsea	5	2	—	—	5	2
Fulham	2	4	1	2	3	6
George's, S.	1	1	—	1	1	2
George S. in the East	1	1	—	—	1	1
Greenwich	6	3	—	2	6	5
Hackney	—	1	—	1	—	2
Hammersmith	7	—	—	2	7	2
Holborn	—	3	—	2	—	5
Islington	4	3	—	1	4	4
Kensington	4	6	—	5	4	11
Lambeth	1	2	1	3	2	5
Lewisham	4	6	—	—	4	6
London, City of	1	—	—	—	1	—
Marylebone S.	6	8	1	6	7	14
Mile End	2	3	—	1	2	4
Paddington	7	6	—	1	7	7
Pancras, S.	6	1	3	6	9	7
Poplar	37	47	19	22	56	69
Shoreditch	50	26	3	4	53	30
Southwark	25	29	6	7	31	36
Stepney	12	10	3	4	15	14
Strand	1	1	—	—	1	1
Wandsworth	48	25	1	4	49	29
Westminster	3	—	—	—	3	—
Whitechapel	2	—	—	1	2	1
Woolwich	—	—	—	3	—	3
Edmonton	1	2	—	—	1	2
West Ham	1	7	5	5	6	12
Guildford	1	—	—	—	1	—
Maidenhead	1	—	—	—	1	—
Salford	1	—	—	—	1	—
Total	273	212	47	88	320	300

From this table it will be seen that, as in former years, there is a very considerable difference in the number of children admitted from the various parishes. This difference becomes more striking when the total number of children is taken

which have been admitted from various parishes since the Ophthalmia Schools were first instituted in 1903 ; as is shown in the following list of a few selected parishes :—

Bloomsbury	..	..	..	..	28
Chelsea	..	..	..	..	14
Hammersmith	..	..	..	..	48
Hampstead	..	..	..	..	3
Islington	..	..	..	..	116
Pancras, S.	..	..	..	..	106
Poplar ..	..	..	..	..	495
Shoreditch	..	..	..	..	164
Strand ..	..	..	..	..	23
Southwark	..	..	..	..	945
Wandsworth	..	..	..	..	561

The largest number of children admitted from any one parish came from Southwark. The number, however, admitted from Southwark this year, viz., 67, is smaller than it has been for the last five years.

Poplar is the parish which has sent the largest number of cases this year, viz., 125, 41 of which were trachoma and 84 non-trachoma. Many of the latter had a mild form of chronic conjunctivitis, which was easily cured by the application of sulphate of zinc drops.

An extensive trial has been given this year to the treatment of trachoma with carbon dioxide snow and very promising results have been obtained.

The only cases of infectious disease occurring at White Oak School were one of chicken-pox and two of German measles.

At High Wood School there were in April 10 cases of measles and in July and December two small outbreaks of chicken-pox, 10 cases in all.

(Signed) E. TREACHER COLLINS.

APPENDIX V.

HOMES FOR DEFECTIVES.

REPORTS OF MEDICAL OFFICER.

(a) *LLOYD HOUSE AND 12, LLOYD STREET.**December 31st, 1911.*

Medical. During the past year the health of the girls in the home has been exceptionally good, and there has been no case of serious illness. At the beginning of the year one girl had an abscess, which necessitated an incision, and another had a slight attack of bronchitis: it was subsequently thought advisable to send the latter to Margate for a change. 3 girls have had small patches of tinea circinata, which were soon cured by treatment. There was also 1 case of herpes and 1 of urticaria. 2 girls have had slight attacks of tonsillitis, 1 an attack of gastritis, and another a slight attack of muscular rheumatism.

Operations. 3 girls have had their tonsils and adenoids removed. In all cases beneficial results have followed. During the year 6 girls have been vaccinated.

Eyes. 5 girls have had their eyes tested, with the result that in the case of 4, glasses were prescribed.

Mental. The majority of the girls in this home have shown definite mental improvement and in some cases the improvement has been most encouraging. Unfortunately, as has been frequently mentioned in former reports, cases have been and are still admitted which are quite unsuitable, considering the fact that these homes were originally intended for feeble-minded children, and not for imbeciles or idiots. The matron reports that the girls have improved very much in their general behaviour, and that there is much less quarrelling and jealousy among them than in former years. During the year 2 girls have been transferred from the special to the ordinary school.

Drill and pocket money. The girls still continue to have weekly drill, and those who have had it for any length of time are materially improved in their general deportment. The girls receive a half-penny a week as pocket money (reduced from a penny), the little money gift still continues to have a most beneficial result.

Admissions. During the past year 13 new cases have been admitted; of these, 3 were subsequently discharged to Tooting Bec Asylum. Another girl who was admitted with severe eczema was returned to her infirmary pending treatment of her condition.

(Signed) R. TURNER.

(b) *26, ELM GROVE, PECKHAM.**December 31st, 1911.*

Medical. With the exception of 1 slight case of eczema at the beginning of the year and 1 case of gastritis, there has been no illness in the home. There are at present 15 inmates of the home, and as many of them are delicate the absence of illness is a matter for special congratulation, and speaks well for the care and attention which are exercised by the staff. All the boys have improved very much in their general health.

- Eyes.** During the year 4 boys attended the Royal London Ophthalmic Hospital, with the result that in 2 cases glasses were found necessary.
- Mental.** Unfortunately the mental standard of the boys admitted into this home has been for some time past exceptionally low, but the more promising cases, and those who have been in the home some length of time show steady and encouraging progress.
- Drill.** The boys receive one hour's drill every week from an instructor, and without exception all have much improved.
- Admissions.** During the year 10 boys have been admitted, 1 of them being a boy re-admitted from Millfield, Littlehampton, where he had been sent for a year on account of his delicate state of health.
- Discharges.** 10 boys have been discharged—8 to Tooting Bec, one to his guardians and 1 to his relatives, as he had improved so much that he was considered fit to be placed at work.

(Signed) R. TURNER.

(c) 81, *EARLSFIELD ROAD, WANDSWORTH.*

December 31st, 1911.

Medical. There has been no serious illness of any kind in the home. In the spring one girl developed German measles and was removed to the South-Western Hospital and 2 girls had an attack of follicular tonsillitis; in the case of one of the latter, the condition of the throat was very suggestive of diphtheria and so a swab was taken. A smear preparation was immediately made and as this showed some bacilli stained in the manner characteristic of the Klebs-Löffler bacillus, and as albumen was present in the urine, it was decided to transfer her immediately to the Grove hospital instead of awaiting the result of the cultures. Subsequently the cultures, on examination, gave negative results.

All the girls have improved a good deal in their general health, and have in every case made a fair increase in height, girth and weight.

- Operations.** 1 girl has had her tonsils and adenoids removed with very beneficial results.
- Eyes.** 2 girls have had their eyes tested at the Royal London Ophthalmic Hospital, in the case of one glasses were found necessary.
- Mental.** All the girls are making satisfactory mental progress. There are, at present, two attending the ordinary school, one having been transferred from the special to the ordinary school during this year.
- Admissions and discharges.** 5 girls have been admitted to the home during the present year, 4 have been discharged from the home, 2 to Tooting Bec Asylum, and 2 to the Colony for feeble-minded girls at the Fountain Hospital.

(Signed) R. TURNER.

*(d) SURREY HOUSE, WANDSWORTH.**December, 31st, 1911.*

Medical. I am glad to be able to report that during the year 1911, the health of the children in this home has been exceptionally satisfactory. There have only been 3 cases of illness and these only of a slight nature. In the spring 1 boy had a severe cold, his temperature reaching 103°, another boy had a slight attack of tonsillitis and a third developed mumps, at the end of the year. In order to minimize the risk of infection it was decided to transfer the last to his infirmary until he should be cured. In addition to the fact of the absence of acute illnesses in a home containing 20 boys, it is satisfactory to note the great improvement all the boys show in their general development. It would be difficult to recognize in some of these healthy boys the weakly, delicate children that they were on admission.

Operations. Slight operations have been performed on 3 boys. 1 has been circumcised and 2 have had their tonsils and adenoids removed, in the case of one of these latter a wart on the under lip was removed also.

Eyes. 3 boys have had their eyes tested during the past year and in every case glasses were found necessary.

Mental and moral. All the boys show satisfactory improvement and in the case of those who have been any length of time in the home very definite improvement has been made. In the matter of nocturnal incontinence particularly, there has been decided improvement, whereas formerly there were several who suffered from this habit, there are at present none. 6 boys can be trusted to go messages and do shopping, and even the smaller ones can be trusted to do little errands such as post letters. 3 boys who on admission suffered from ungovernable temper are now quite cured and have learnt to control themselves. 1 of the latter has been transferred to the ordinary school. 2 boys attend the ordinary school, 1 of these having been transferred from the special to the ordinary school during this year. It is stated that probably 3 others will shortly be transferred to the ordinary school.

Drill. Drill has been given regularly with beneficial results. The boys have all improved both in the way they do the exercises and also in the increased alertness with which they obey the words of command.

Admissions and discharges. 7 new cases have been admitted during the year. 7 have been discharged—3 to Tooting Bec Asylum, after having been in the home about a year; 3 to the Bridge Industrial Home at Witham, and 1 to his guardians. The last boy was so much improved that he was considered to be normal and no longer to require special training.

(Signed) R. TURNER.

(e) *COLONY FOR ELDER FEEBLE-MINDED GIRLS AT
FOUNTAIN HOSPITAL, TOOTING.*

31st December, 1911.

Admissions and discharges. There are at present 87 girls in the colony. During the year 1911, 22 girls have been admitted, 6 of these having been transferred from Lloyd House and 2 from the Earlsfield Road home. There have been 18 discharges. 1 girl was discharged to her infirmary suffering from phthisis, 2 to their unions as unsuitable cases and 1 to Tooting Bec Asylum. Another has been claimed by her relatives, who insisted on her discharge, in spite of advice to the contrary as it was felt that the girl's mental condition made her discharge undesirable. On the other hand it is an encouraging fact that 13 girls are so much improved that they have been discharged in order that situations may be found for them. Of these 13, 8 have been returned to their unions (one of them having since gone into a situation), 2 were placed directly from the colony into situations, 1 was discharged to her sister, who has since found her work and 2 have been taken by the Metropolitan Association for Befriending Young Servants.

* * * * *

New quarters. The past year has been one of great change for the colony. As further accommodation was required at the High Wood School, Brentwood, for the treatment of ophthalmia cases, the colony was transferred from there to the Fountain Hospital, Tooting Grove, part of which was re-opened for the accommodation of the girls. Three of the wards are used by them as dormitories, one has been converted into a workroom, one into a schoolroom and another into a recreation room. The larger rooms are thoroughly appreciated by the girls as it gives them a sense of greater freedom. It also is more convenient and makes the necessary supervision easier.

* * * * *

Occupations. In all departments of work most satisfactory and encouraging progress has been made this year. The industries include weaving, machine knitting of stockings, jerseys, caps, golf coats, vests, gaiters, etc., hand knitting of dishcloths and gloves, the making of hats and rugs, chair-caning, dressmaking and laundry work. There are 3 looms, 2 jersey knitting machines, 2 stocking knitting machines and 3 sewing machines in use. The girls now make their new dresses, also those of the staff; several can machine well and two or three of the girls can make a dress throughout without help.

To give some idea of the work that has been done it may be of interest to enumerate the articles manufactured in the past six months—from July to December:—133 towels, 573 pairs of stockings, 237 jerseys, 171 caps, 10 golf coats, 125 vests, 15 pairs of gaiters, 24 dishcloths, 13 baskets, 243 hats, 27 rugs, 4 shawls, 724 new articles of clothing (including dresses), besides repairing of a great number of clothes. When it is remembered that the time given to the industries is only $4\frac{1}{2}$ hours a day for 4 days and 2 hours for the other 2 working days, it will be seen that the girls work very rapidly. Quickly though they work there are more orders received than can be executed. Orders have been received from the Central Stores, Park Hospital, London Hospital, The Church of England Waif and Stray Society, besides various other institutions. There are besides a great number of private orders coming in. The work is well done and has given great satisfaction.

There is a good steam laundry in which 10 of the girls work. Not only do they wash the clothes of all the inmates of the colony, but also those of Lloyd House, of the Earlsfield Road and Surrey House homes, besides doing a little of the laundry of the Head Office. The total number of articles washed by the girls in the past six months was 52,530.

School. Some of the girls attend school either in the morning or in the afternoon, the remainder of their time being devoted to some industry.

* * * * *

Musical drill and singing. Musical drill is held daily from 6 to 7 p.m., the girls being drilled in two sections. They all enjoy it and are making excellent progress. Four days in the week the girls have a singing class and are now able to sing very nicely.

Medical. The health of the girls has been very good this year. With the exception of one girl who developed phthisis and had to be removed to her infirmary and one who had a slight epileptic fit in the early part of the year, there has been no case of serious illness. 3 girls have had their eyes tested during the year, and in all cases glasses were found to be necessary. 2 other girls had their eyes re-tested with the result that their glasses were changed. 4 girls have been vaccinated.

(Signed) R. TURNER.

(f) *BRIDGE INDUSTRIAL HOME, WITHAM.*

REPORT OF THE MENTAL SPECIALIST.

1st January, 1912.

Statistics.

Inmates on 1st January, 1911	..	..	..	..	180
Admitted during the year	..	..	..	..	37
Re-admitted during the year	..	..	..	..	1
Discharged to Guardians	..	..	..	..	2
Transferred to asylum	..	..	..	..	1
Transferred to fever hospital	..	..	..	..	1
Transferred to Queen Mary's Hospital	..	..	..	..	2
Absconded	..	..	..	..	1
Died	..	..	..	..	2
Remaining in home on 31st December, 1911	..	..	..	..	209

The general health of the institution throughout the year was good, but there was one case of typhoid, the cause being unknown.

The cause of the two deaths was pericarditis and peritonitis.

Staff.

An assistant gardener has been engaged as an addition to the staff, and, under his supervision, the inmates have cultivated the ten acres of land which was acquired during the previous year, laying down part as a cricket ground, and on the remainder raising a good crop of potatoes and other vegetables. The same boys also erected a fence round the ten acres, partly iron and partly wire, with wooden posts, no extra paid labour being employed.

Employments. The following list shows how the inmates are employed :—

Shoe shop	..	..	..	..	..	46
Cord shop	..	..	..	..	..	45
Tailor's shop	..	..	..	..	..	36
Garden	..	..	..	..	..	42
Laundry	..	..	..	..	..	12
Housework	..	..	..	..	..	15
Sewing room	..	..	..	..	..	5
Cook	..	..	..	..	..	4
Mechanics	..	..	..	..	..	4
						209

Besides being taught the above, 130 attend school for certain hours during the week.

Shoe shop. During the year 29,450 repairs were executed, showing an increase of nearly 4,000 repairs over that of the previous year. The new work consisted of 575 pairs of boots, sandals, braces, etc.

Cord shop. 16,799 yards of sash cord have been made, being an increase of 3,793 yards over the production of the previous year, while a considerable amount of carpentering work has been executed by the industrial attendant with the help of some of the patients. In connection with this shop, a new and very successful industry has been started for the inmates themselves, this is the making of wooden toys. These toys have been well finished, and have been transferred for the use of the children in various of the Board's institutions.

Tailors' shop. 3,599 repairs and 1,622 new articles form the output of this shop for the year. Amongst the new articles 293 tweed coats were completed, as compared with 194 in 1910, this shows very considerable improvement in the capacity of the inmates as tailors, coats being very much more difficult for the inmates to undertake, and complete satisfactorily.

Garden. 42 inmates are employed in the garden, and besides the cultivation of the new land already mentioned, the old playground has been cultivated, and will provide considerably increased area for growing market gardening food stuffs.

Drill. All inmates are drilled for about threequarters of an hour daily, and the progress made by the special class has been most marked. In this class there are about 70 boys, who drill with a precision certainly equal to, if not better than, a class of the same size of normal lads. They obey the order of command, and go through most complicated manœuvres without the least hesitation. Every boy seems to understand exactly what to do at the right moment, and does not have to watch the movements of the leading boy, before himself taking up the part. I consider great credit is due to the Drill Master for the way in which he has brought the boys on.

Band. The members of the band have continued to improve, and can now play much more difficult pieces in a most creditable manner, and well deserve the praise they obtained from the Committee and visitors at the Christmas entertainment. During the year eight public engagements were undertaken, all of which were successfully carried out. Four of these performances, viz., at Wickham Bishops, Co-operative Societies Sports, Hatfield, and a cricket match at Witham, were paid for, the total sum received being £11 18s. 0d.

Fire brigade. On the 11th April, 1911, the boys took down the fire engine to an adjoining farm, and put out a fire which had broken out and got well ahead. The Essex and Suffolk Insurance Company showed their appreciation by forwarding a donation of one guinea.

For the first time since the home started I am able to submit tables showing the accounts of the various shops as under :—

<i>Dr.</i>		SHOEMAKER'S ACCOUNT.			<i>Cr.</i>	
		£	s.	d.		£ s. d.
Value of stock brought forward		94	15	2	Value of repairs and goods	
„ „ new stock		484	18	9	disposed of	553 17 7
Wages		41	1	3	Value of stock in hand ...	84 1 8
	Balance	26	17	0	Leather re-transferred to stores	9 12 11
		<hr/>				<hr/>
		£647	12	2		£647 12 2
Patient labour not charged.						

Dr.	CORD ACCOUNT.						Cr.
		£	s.	d.			£ s. d.
Value of stock brought forward		27	11	4	Value of cord transferred	...	87 1 4
„ „ new stock	...	42	4	9	Value of skipping ropes	...	18 0
Wages	...	10	17	5	Sash cord in hand	...	16 11 9
	Balance	42	6	10	String in hand	...	18 9 3
		£123	0	4			£123 0 4
Patient labour not charged.							

Dr.	TAILOR'S ACCOUNT.						Cr.
		£	s.	d.			£ s. d.
Value of stock brought forward		30	19	1	Value of articles made	...	397 5 2
„ „ new stock	...	391	0	0	Transferred to other accounts	...	4 4 3
Wages	...	24	1	8	Value of stock in hand	...	94 14 2
	Balance	50	2	10			
		£496	3	7			£496 3 7
Patient labour not charged.							

Dr.	FARM AND GARDEN ACCOUNT.						Cr.
		£	s.	d.			£ s. d.
Stock brought forward	...	89	0	4	Produce sold	...	296 19 7
New stock	...	106	16	3	Stock in hand	...	51 1 11
Wages	...	28	2	1			
	Balance	124	2	10			
		£348	1	6			£348 1 6
Patient labour not charged.							

Games. Cricket and football matches have been played as usual, with the following results :—

	Played.	Won.	Lost.	Drawn.
Cricket ..	12	6	6	0
Football ..	14	10	1	3

I wish to thank the Superintendent and his wife for giving me every assistance in carrying out my duties.

(Signed) A. ROTHERHAM.

APPENDIX VI.

Statement of cases admitted and discharged at the homes and schools during 1911 arranged under the respective parishes and unions.

PARISH OR UNION.	Sick, convalescent and debilitated.				Ringworm.			Ophthalmia.				Defective.				
	Remaining on 31st Dec., 1910.	Admitted during 1911.	Discharged and died during 1911.	Remaining on 31st Dec., 1911.	Remaining on 31st Dec., 1910.	Admitted during 1911.	Discharged and died during 1911.	Remaining on 31st Dec., 1911.	Remaining on 31st Dec., 1910.	Admitted during 1911.	Discharged and died during 1911.	Remaining on 31st Dec., 1910.	Admitted during 1911.	Discharged and died during 1911.	Remaining on 31st Dec., 1911.	
Bermondsey ..	46	119	87	78	7	6	12	1	27	12	15	24	11	4	12	
Bethnal Green ..	70	245	188	127	7	24	28	3	37	13	23	27	19	3	19	
Bloomsbury ..	7	3	4	6	..	2	2	..	4	..	3	1	1	1	2	
Camberwell ..	77	177	174	80	17	35	35	17	16	28	19	25	10	2	10	
Chelsea ..	20	38	44	14	8	12	17	3	3	7	5	5	3	3	6	
Fulham ..	64	230	187	107	8	9	11	6	6	9	5	10	3	1	4	
George's, S. ..	40	116	96	60	6	23	26	3	6	3	3	6	11	2	11	
George, S., in-the-East ..	53	98	84	67	..	8	5	3	1	2	2	1	5	..	5	
Greenwich ..	40	95	75	60	4	6	6	4	20	11	15	16	21	5	23	
Hackney ..	79	177	155	101	27	49	65	11	8	5	4	9	15	4	14	
Hammersmith ..	22	62	47	37	9	9	16	2	4	9	5	8	3	1	2	
Hampstead ..	7	40	27	20	5	7	11	1	..	..	..	..	4	2	4
Holborn ..	46	103	86	63	7	13	17	3	8	5	7	6	7	2	5	
Islington ..	58	259	191	126	17	54	56	15	18	8	10	16	28	9	30	
Kensington ..	51	140	123	68	18	42	48	12	15	14	11	18	10	2	8	
Lambeth ..	66	253	190	129	21	37	48	10	27	6	13	20	33	17	45	
Lewisham ..	32	56	61	27	6	34	36	4	6	10	7	9	1	..	1	
London, City of ..	1	..	1	..	..	2	2	..	4	1	2	3	..	..	..
Marylebone, S. ..	67	241	230	78	12	26	35	3	13	20	13	20	22	11	28	
Mile End Old Town ..	26	59	41	44	11	22	30	3	2	6	1	7	17	2	17	
Paddington ..	37	180	152	65	6	9	10	5	10	15	15	10	10	7	13	
Pancras, S. ..	79	180	159	100	2	18	14	6	21	15	8	28	15	3	16	
Poplar ..	63	211	190	84	9	11	17	3	77	122	99	100	7	2	9	
Shoreditch ..	53	49	64	38	6	19	21	4	11	82	45	48	11	1	12	
Southwark ..	85	178	155	108	10	39	43	6	116	68	88	96	14	..	12	
Stepney ..	54	128	128	54	4	4	6	2	40	29	28	41	8	2	8	
Strand ..	4	3	3	4	..	4	4	..	2	2	2	2	4	..	4	
Wandsworth ..	100	241	203	138	22	80	80	22	61	79	61	79	17	2	17	
Westminster ..	2	16	15	3	1	4	5	..	2	3	4	1	2	1	3	
Whitechapel ..	32	123	97	58	2	6	6	..	7	2	2	7	4	1	5	
Woolwich ..	31	28	39	20	7	9	14	2	7	3	5	5	15	4	19	
Extra-Metropolitan ..	5	51	26	30	44	74	96	22	33	26	27	32	..	..	..
Total ..	1417	3899	3322	1994	303	(a)697	(a)822	178	612	(a)615	(a)547	680	331	92	59	364

Description and name.	Accommodation.	Date of opening.	Remaining on 1st January, 1911.			Admitted.						Discharged.						Died during the year.			Remaining on 31st Dec., 1911.			Total number of children admitted from opening of institution to 31st December, 1911.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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a Inmates transferred from High Wood School to Fountain Hospital during week ended 25th: Feb., 1911.

b Deducting 3,162 children transferred between the institutions and other of the Board's institutions the total number of cases admitted is found to be 25,246.

Adding the following children not now included in this table, viz., 673 ringworm (boys and girls), Bridge School (now Bridge Industrial Home), 37 defectives (boys), High Wood School, 87 defectives (boys), Kingwood Road homes, and 20,782 (boys), 3,992 (girls), the total number of cases admitted is found to be 50,817.

Excluding re-admissions of feeble-minded children on return from seaside homes after summer holidays.

d Including children transferred to or from seaside homes for summer holidays, excluding re-admissions of reconvicted children on return from seaside homes.

ANNUAL REPORT, 1911,

APPENDIX VIII.

Numbers relating to staff and inmates and average weekly cost of children for the year ended Michaelmas 1911.

(Figures for the year 1910 are inserted under the figures for the year 1911).

SCHOOL OR HOME.	Average daily number of inmates.	Percentage of average daily number to normal accommodation.	Permanent officers (all grades), highest number.	Food and clothing per inmate per week.		Total cost per inmate per week, including all charges.*	
				s.	d.	s.	d.
HOMES FOR SICK, CONVALESCENT AND DEBILITATED CHILDREN—							
I. Queen Mary's Hospital for Children	737 814	74 81	350 334	3 3	4 3	18 16	3 8
II. Park Hospital for Children ..	416 ..	52 ..	328 ..	5 ..	0 ..	† 28 ..	1 ..
III. S. Anne's Home	131 131	98 98	29 29	3 3	0 3	11 11	1 10
IV. East Cliff House	124 124	95 95	39 38	3 3	4 5	13 13	2 2
V. Millfield	119 118	99 98	35 34	4 4	3 1	13 12	0 11
RINGWORM SCHOOL—							
I. The Downs School §	281 318	67 76	105 104	3 3	1 1	15 14	6 9
OPHTHALMIA SCHOOLS—							
I. White Oak School	341 339	95 94	94 102	3 3	3 3	14 14	4 8
II. High Wood School	324 311	90 86	103 98	3 3	5 4	14 14	2 4
HOMES FOR DEFECTIVE CHILDREN—							
I. Lloyd House, and 12, Lloyd St.	25 23	89 82	6 6	4 3	0 8	11 12	8 4
II. 26, Elm Grove	13 13	87 87	5 5	2 2	11 7	11 12	9 4
III. 81, Earlsfield Road	9 9	90 90	4 4	3 4	10 7	13 13	6 2
IV. Surrey House	18 18	90 90	5 5	3 3	5 10	10 10	3 5
V. Fountain Hospital (temporary)	53 ..	.. ..	26..	....	....	....	....
VI. Bridge Industrial Home ..	191 167	91 97	22 21	3 4	10 2	9 9	5 10

* Except rent or loan charges, special expenditure, and head office or central expenses.

† This hospital was only partially occupied by patients during the period in question, the daily average number of patients for the year being little over half the normal accommodation.

§ Convalescent cases are included with ringworm children.

ANNUAL REPORT OF THE COMMITTEE OF MANAGEMENT OF THE
TRAINING SHIP EXMOUTH FOR THE YEAR 1911.

1. We submit our thirty-sixth annual report on the work of the Exmouth for the year 1911.

The year's work.

2. The following statistics show briefly the numbers dealt with during the past year, viz. :—

Boys on board 1st January, 1911	..	..	..	697
Discharged during the year	..	..	..	320
Died	..	..	..	2
Admitted	..	..	..	282
Remaining on board 31st December, 1911	..	..	..	657

Of the boys discharged—

105 were entered into the navy.

147 „ „ „ „ mercantile marine.

4 „ „ „ „ army as musicians.

64 „ discharged by order of the guardians to whom they were chargeable or for other reasons.

The number of discharges to the Royal Navy was the highest since 1902. No less than 40 per cent. of the number passed into the advanced class on H.M.S. Impregnable, including every one of the boys who had been trained specially in the advanced class on the Exmouth. Several prizes have been won by these boys, both in educational work and in athletic competitions. During the year we learnt that a Greenwich boy, who left in 1909, is now commodore's steward on H.M.S. Neptune, and that a Kensington boy who left a few years ago is quartermaster on the Mauretania.

The total number of admissions showed a falling off of 40 as compared with the previous year.

The captain-superintendent calls attention in his report to the fact that he has had to refuse several applications for skilled ratings in the mercantile marine owing to the dearth of boys, and this in spite of the fact that he cannot find the case of a boy, who has left the ship 3½ years with a good character, who is not earning £4 a month and all food found, and once again we call the attention of guardians to the excellent prospects which the training on board offers to boys of good character.

The training.

3. The standard of training has been maintained during the year. Swedish physical training apparatus of the type used in the Royal Naval schools is being provided, and is being made at Darenth Asylum. The deputy head master has visited the naval training schools in order to become familiar with their requirements, and also some of the metropolitan poor law schools. A recommendation having been made to the Admiralty by the Inspecting Captain of Boys' Training Ships that facilities should be given for the entry of Exmouth boys as boy artificers in the navy, the Lords Commissioners have written stating that they will be prepared to consider the claims of any specially eligible candidate whom it is desired to recommend for entry in the event of any vacancies existing.

Annual inspection. 4. The annual inspection of the ship by the Board was held on the 27th May, when Sir Owen Philipps, K.C.M.G., chairman of the Royal Mail Steam Packet Co., the British and African Steam Navigation Co., and Elder, Dempster & Co., Ltd., and vice-chairman of the Port of London Authority, was the principal guest, and was accompanied by Lady Philipps, who presented the prizes to the boys. Lady Philipps afterwards very kindly presented a handsome silver cup to be won by the best division at boat pulling. We have again to thank the donors of special prizes for competition amongst the boys.

Works and repairs. 5. During the year the Board approved of certain of the decks being caulked and repaired, and of the pitch pine upper deck, which had shown signs of wear, being relaid in teak.

Standards for admissions. 6. In May we submitted to the Board a long report with regard to the standards for admission to the Exmouth in accordance with the views which we expressed in our last annual report. These views were adopted by the Board and a revised form of admission order which we submitted at the same time was approved by them and is now in use.

Committee. 7. At the annual re-election of the committee in May there was one vacancy, which was subsequently filled by the re-election of Mr. T. Cornell. We again elected Mr. Geoffrey Drage as our chairman and Mr. C. J. Benson as our vice-chairman.

Sea-going tender. 8. Towards the close of 1910 a letter was received from the Local Government Board adverting to the Managers' proposal to accept a tender for building a new sea-going training ship at a cost of £17,964, and asking that the matter should be reconsidered with a view of reducing the cost of the scheme. The letter was referred to us with instructions to bring up a revised scheme, and as we were given to understand that the Local Government Board took the view that the possibilities of obtaining a second-hand vessel had not been exhausted, we decided to make full enquiries as to the practicability of adopting this alternative course.

The number of available auxiliary vessels of the character required has proved to be very limited. Difficulties relating to price, age and condition, have been encountered, as might be expected. During the past twelve months the particulars of every vessel which has come upon the market have been carefully considered, and several vessels have been inspected. Only one suitable vessel was found during this period, and was sold elsewhere while negotiations were in progress. At the end of the year the naval architects were engaged in examining two other vessels which had been brought to our notice.*

Recreation. 9. During the winter the boys have competed at football with the metropolitan district and separate schools for the "Whitehall" cup, which is presented by the Local Government Board. In July a camp was formed on shore for those boys who were unable to spend their summer leave with relatives or friends. Arrangements were made for extra fare and amusements in celebration of the coronation of Their Majesties King George V. and Queen Mary, and the boys gave a display of drill and other exercises in Grays which was much appreciated by the inhabitants.

* On the 24th February, 1912, the Committee submitted a scheme for building a new vessel of a modified design, at a cost of £12,700. The scheme was approved by the Managers and the Local Government Board, and a contract for the work of construction has been entered into with the Rennie Forrestt Shipbuilding, Engineering and Dry Dock Co., Ltd., of Wyvenhoe, Essex, at the amount stated.

It has been decided to establish a printed magazine which will deal with matters of interest on board. The cost has been subscribed by members of the committee.

Health. 10. The health of the boys has been good with the exception of a few cases of measles in January and an outbreak of a mild form of influenza in December. We regret that two boys died during the year, one from peritonitis, and the other from meningitis, after removal to the London Hospital.

Inspecting Captain's report. 11. The following is an extract from a report made to the Admiralty by Inspecting Captain J. M. de Robeck after an inspection of the ship in June :—

The establishment generally reflects great credit on the Captain-Superintendent and his staff.

The boys appeared to be well, clean and smartly turned out. They were apparently very happy and with plenty of esprit de corps among them.

The drills and exercises were efficiently performed.

Visit of members of metropolitan boards of guardians. 12. On the 7th June about 200 members of metropolitan boards of guardians accepted an invitation from the Managers to visit the ship, and the records which they made before leaving gave evidence of universal satisfaction with the condition of the ship and the appearance and training of the boys. We regret, however, that the visit did not result in any increase in the number of London boys sent to the ship.

Visit of Central Poor Law Conference. 13. A visit was paid to the ship by 470 members of the Central Poor Law Conference on the 21st February, and a letter was received subsequently from the honorary secretary stating that the members were extremely pleased with what they saw on board, and that they had subscribed the sum of £10 for the purchase of books for the boys' library.

Visit of Admiral Count Togo. 14. On the 5th July Admiral Count Togo, Chief of the Naval General Staff of the Imperial Japanese Navy, visited the ship, accompanied by Rear-Admiral Sir Charles Ottley, K.C.M.G., Secretary to the Committee of Imperial Defence, and Commander S. Saito, I.J.N. Admiral Count Togo presented his signed photograph to the ship and made the following entry in the visitors' book :—

Admiral Count Togo very heartily congratulates Capt. Colmore upon the admirable smartness, good order, cleanliness and discipline of the Exmouth.

The visit of this distinguished representative of an allied power was highly appreciated by the ship's company.

Other visitors' records. 15. The following records have been made by other visitors during the year :—

(i.) Rt. Hon. Lord Brassey, G.C.B. (31st January) :

I was most favourably impressed with all we saw on the occasion of our recent careful inspection of the Exmouth. I believe the ship to be the most efficient training-ship afloat, for the special work she is designed to do. The admirable training given reflects the highest credit on Captain Colmore and his staff.

(ii.) Chief Inspector of British Immigrant Children in Canada (31st January) :

I desire to express my appreciation of the very instructive and pleasant time I was privileged to spend on the 31st ultimo on board the Exmouth. It was but another revelation to me of what the state is doing to save her less fortunate youth and to transform this otherwise waste material into not only useful, but loyal and manly citizens of our Empire. The general appearance of the boys, their intelligent faces, and their freedom of manner all reflected credit on the Captain Superintendent of the Exmouth.

(iii.) Strood Guardians (28th June) :

The Guardians of Strood Union have to-day made their annual visit to the Exmouth and witnessed part of the drill and were much impressed by the smartness and intelligence of the boys and the general order that prevailed throughout the ship, all reflecting the highest credit upon the captain-superintendent and the other officers of the ship.

(iv.) Romford Guardians (9th August) :

The Guardians of the Romford Union have this day visited the Exmouth and are very pleased with all they have seen, viz., the cleanliness and smartness of the boys and also splendid order, which reflects great credit on all the officers in command.

(v.) Croydon Guardians (11th August) :

The Guardians of the Croydon Union visited the Exmouth and were amply satisfied with all they saw, and acknowledge the courtesy of the officers in affording every facility to the visitors. The spirit of cheerfulness amongst the boys was most marked. Cleanliness and order, with perfect freedom, prevails and we regard the Exmouth as an excellent institution for the class of boys on board.

(vi.) Willesden Guardians (15th August) :

We have to-day visited the Exmouth and seen various lads from Willesden parish and would express our complete satisfaction with their appearance and apparent progress. We have also had an opportunity of inspecting the ship and have nothing but commendation and approval for the provisions made for the mental and physical improvement of the lads.

(vii.) Farnham Guardians (6th September) :

Our visit to Training Ship Exmouth on 6th September, 1911, gave us great pleasure. We found the boys belonging to Farnham Union well, and evidently well cared for. The general healthy and happy appearance of the boys is most satisfactory. Their training in every respect and the arrangements throughout the ship appear admirable.

(viii.) Kingston Guardians (25th October) :

The Guardians of the Kingston Union have this day visited the Exmouth. They were very pleased with all they have seen, the smartness of the boys, the excellent way in which they did their drills. Thanks very much to the officer for the kind way in which they were received.

(ix.) Stockport Guardians (28th October) :

The guardians of the Stockport Union have this day visited the Exmouth. We have had every kindness shown to us and are very pleased with everything that we have seen and found our boys on board very comfortable and happy.

(x.) A Romford Guardian (1st November) :

I have this day visited the Exmouth unofficially and was very pleased with all I have seen and have had every kindness shown by the captain and lieutenant, also by the boys from our Union (Romford) looking so well and comfortable.

(xi.) Haslingden Guardians (18th November) :

We have visited our four boys this day, and, under the guidance of the first lieutenant, renewed acquaintance with all parts of the Exmouth. As usual we are afresh impressed with the excellence of the administration, which is to our mind, the high water mark of naval poor law administration.

Cost per head. 16. Full details as to the average weekly cost during the past ten years under various headings are given in the Board's annual report, and, therefore, are not reproduced here, but we may mention that the cost per boy per week for maintenance and clothing for the year ended Michaelmas, 1911, was 3s. 11d., and the cost, including all charges (but excluding loan charges, special expenditure and head office expenses) was 10s. 5d.

(Signed) GEOFFREY DRAGE,
Chairman.

APPENDIX I.

ANNUAL REPORT OF THE CAPTAIN-SUPERINTENDENT FOR 1911.

To the Committee of the Training Ship Exmouth.

GENTLEMEN,

I beg to submit my report for 1911.

Table I. shows the admissions and discharges during 1911, as well as in previous years.

Table II. shows the number of boys admitted from each of the metropolitan parishes and unions and country unions in 1911 and also during the time the ship has been established.

During the past year 283 boys were assisted to get another ship for the second time. These include boys who left the sea for a time in the hope of doing better on shore and boys who lost their berths through their ships being laid up or trade being bad.

Seamanship. The apparatus for developing the boys and at the same time teaching them boat pulling has been in constant use in inclement weather. Boat sailing and pulling have been carried out frequently, the latter being carried out each morning, weather permitting, by the watch at seamanship and gunnery. The signal classes under Mr. Webb, the chief signalling instructor, ably assisted by the other instructors, have made our boys most proficient in morse and semaphore. The special signal classes are now given an entire knowledge of international signalling, including post office telegraphy. The riggers' class, that is, boys who have passed out of all instructions, have been engaged in making new paunch mats, re-fitting boats' falls, rattling down rigging, etc., re-stropping blocks and fitting wire hawsers and clothes lines; also taking down masts and yards, and re-fitting all gear on foremast.

Under the sailmaker, they have completed the following work :—

NEW—

- 2 upper deck awnings.
- 96 hammocks.
- 120 kit bags.
- 20 mess table covers.
- Pads for boxing ring.

REPAIRS—

- Re-made and re-covered 84 mattresses.
- New leech to brigantine's mainsail.
- Overhauled and repaired brigantine sails.
- General repairs to hammocks.
- Alteration to forecastle awning.

No fewer than 160 boys have passed out of helm, lead and compass instruction.

The brigantine "Steadfast" cruised from April to October. 200 boys were practically trained, and 16 of the band who did not go on midsummer leave also were sent on a fortnight's cruise. The mates are employed during the winter months, when the brigantine is laid up, in instructing the boys in knotting and splicing and boat-pulling.

Gunnery.

The boys have been admirably instructed in this department. The closest touch has been kept with all naval alterations in drills. The range at Westfield has been regularly used for Morris Tube practice. The 6-pounder quick-firing gun, lent by the Admiralty, has been constantly used for drill.

Navigation instruction.

The boys of the navigation class (2nd year advanced section) have now completed the whole of the syllabus work necessary for the Board of Trade 2nd mate's certificate, and, while awaiting the completion of the new steam-tender, will proceed to the higher branches of navigation and nautical astronomy.

During the year two of the best educated members of the class entered the Royal Navy as advanced boys, choosing gunnery as their special subject. Meanwhile they are continuing the study of navigation on H.M.S. "Impregnable," and their ambition is, eventually, to become warrant officers in the service.

The deputy head master is urging the members of his staff to take an interest in navigation and astronomical work, and in the last Board of Education examinations one 1st class advanced and two 1st class elementary certificates were obtained by Messrs. Tunstall, Read and Ducé.

Ambulance.

The band boys have been instructed by Dr. Partridge in first aid to injured persons. The examiner appointed by the S. John Ambulance Association was Dr. Hirsch; 39 boys passed the examination and were awarded the certificate. At the last examination, at which 24 boys sat, every boy was successful.

School.

H.M. Inspectors, Messrs. Butler, Hartley and Webb, visited the ship on February 14th.

Band.

During the past year the band has been maintained in a high state of efficiency. The examination by Lieut. Franklin, Musical Director of the R.N. School of Music, was carried out in April. His report is as follows:—

"On the 21st and 22nd April, in accordance with instructions, I examined the bands of the Training Ship Exmouth under your command and beg to report as follows:—

"At 9-40 a.m., the 1st class band were formed up and played a rather difficult march round the deck in a very satisfactory manner. The time was excellent and regular, and the band 'full' and well balanced.

"About 30 of them afterwards played a selection of Scotch airs, introducing solos for various instruments, which were well rendered, particularly a euphonium solo by boy Coltman.

"The same boys then changed over to their orchestral instruments and played a selection and a set of vales with the same ability.

"I then tested them individually in practical knowledge—sight-reading, etc. The sight-reading was not so good and I would suggest that more attention be paid to this important part of study.

"The *viva voce* examination on the elements of music, formation of major and minor scales, time, signatures, etc., etc., was very good indeed, so much so that I had to subsequently set a paper, considerably above the standard generally used, to enable me to select prize winners. The result was two-thirds were over 75 per cent. and the winners over 80 per cent.

"Altogether I think this 1st class band highly satisfactory and reflects great credit on Mr. Daines.

"I then examined the 2nd class band in scales and exercises also in class for elements of music. The boys showed satisfactory ability in the practical work and were very good in elements.

"The 3rd class band were very young beginners and had not begun their practical work, but showed good promise by their answers in *viva voce* examination.

"I trust I may mention here that I think Mr. Daines has quite enough to do to instruct and prepare these three bands, numbering close on 100, and suggest a proper bugle instructor be employed for the bugle bands (over 50 in number). These bugle bands played very well indeed as a band, but when I examined them individually they

were not very good—this for the want of practical illustration which would be given by a bugle instructor as obtains throughout both services—and not by a bandmaster. It is quite a distinct instruction. Of course, Mr. Daines could supervise and direct the course. Under existing conditions I consider the 1st class bugle band very satisfactory, and the 2nd class band satisfactory, and showed good promise.

“All the instruments were exceedingly well kept and show keen supervision, but I noticed foreign made instruments whose ‘*timbre*’ is very different to British made ones, and they can rarely be tuned, and I would advise getting either all from one or the other but not mixed. The result is always bad.

“I have explained in another letter my idea as to age, etc., of boys joining the band, and if that arrangement is carried out it will be a great advantage to both the Royal Naval School of Music and to the Training Ship Exmouth, and lastly, which I know concerns you most, viz., the best future for the boys.

“I beg to forward the suggested list of prize winners.”

Swimming. Very good progress has been made in this instruction, no fewer than 260 boys having been taught to swim.

Tailoring. A large amount of work has been done in the tailor’s shop during the past year. Some thousands of articles have been made or repaired. Boys are taught to sew and repair their clothing, and some boys are taught the sewing machine and also the machine for mending boys’ socks and jerseys.

Domestics. The training of domestics has been most thoroughly carried out, and I continue to receive some excellent reports of our domestic boys.

Health. Dr. Partridge, the medical officer, reports :—

“During the year 1911, there have been 725 medical cases, and 400 of a surgical character, admitted to the infirmary of the Training Ship Exmouth.

“Measles occurred in January, and this necessitated the admission to hospital of many boys in addition to the ten affected.

“Of other infectious diseases there have been two cases of diphtheria, one of scarlet, and two of enteric fever.

“During December a mild form of influenza affected 153 boys in one fortnight.

“There were two deaths in the year, one boy dying from peritonitis, and the other from meningitis. The latter died in the London Hospital.

“Two cases of appendicitis occurred, one being operated upon successfully in the London Hospital, and one at Queen Mary’s Hospital, Carshalton. Several boys have been sent to the latter institution as convalescents after acute illness, with great benefit in all cases.

“Two ambulance classes were held, 39 boys obtaining the S. John’s Association Junior Certificate. Three officers succeeded in passing the adult examination.”

Dentist’s report. The surgeon-dentist, Mr. E. Keen, M.R.C.S., L.D.S., reports to me as follows :—

“During the past year I have visited the ship or infirmary each week, in the morning for inspections, and in the afternoon for operation. I find that the result of my work has been :—

Inspections.	Stoppings.	Extractions.		Scalings.
		Permanent.	Temporary.	
1,849	335	79	212	27

“Four boys have been fitted with artificial teeth.”

Religious instruction. The chaplain, the Rev. A. H. W. Seally, reports :—

“I have visited the respective class-rooms regularly and have examined the boys individually, and have been highly pleased with their bright and intelligent answers. The Sunday morning services have been marked by their brightness and have been joined in very heartily by the boys. I have to thank the officers for the great help they have so readily given me in the conduct of these services. The chairman of the Ship’s Committee has been present at one of our services and paid us a very high compliment on the way in which it was carried out. The musical portion of the service has been rendered with great feeling and reverence. The week-day classes in religious knowledge have been highly gratifying—I cannot speak too highly of the boys’ conduct—it has been excellent, they take a keen interest in their lessons. A party of boys has attended

the 8 o'clock Celebration of the Holy Communion at the Parish Church on Sundays. The boys' conduct at this service has been exemplary, they value it much. I have interviewed every new boy as he joined the vessel and have given him counsel and advice. Many of the old boys have visited me at my house on a Sunday, and many an encouraging letter have I received from them. The sick have been visited regularly and much of my time has been spent at the Infirmary, and I have been asked by the patients whom I have visited in the early part of the day to come at night to say prayers with them ; this I have done. The Bishop of Barking, at the recent Confirmation, expressed his great satisfaction with the lads' knowledge of the Bible and the Church Catechism. I look back upon an exceedingly happy year's work with the lads."

**General
remarks.**

The conduct of the boys has been very good. During the long winter evenings the officers gave some excellent entertainments under the Chief Seaman Instructor, Mr. Cotterell.

The nautical opera given by the boys under the tuition of Mr. Bolt, senior assistant schoolmaster, was most excellent, all the dresses were made on board, and every officer assisted to the utmost of his power.

The boxing competitions are very popular with the boys, and the keenest interest has been taken by Lieut. Coplestone and his assistants.

The annual confirmation was held on May 10th on board the ship, by the Lord Bishop of Barking, who expressed himself much pleased with the attention and reverent behaviour shewn by the boys. The boys had been carefully prepared by our chaplain, assisted by the head schoolmaster.

The output of boys to the navy has been the highest since 1902, and no less than 40 per cent. have passed into the "advanced class," and, of boys specially trained in the navy advanced class on board, 100 per cent. passed into the "advanced class" on board H.M.S. Impregnable, which reflects the greatest credit on our deputy head schoolmaster, Mr. Tunstall, and his assistants. The school has advanced by leaps and bounds and the closest touch is being kept with the naval improvements.

The latest reports from H.M.S. "Impregnable" show that Wm. Lawson, Camberwell, obtained 2nd prize for essay writing ; A. Sherlock, of Woolwich, 1st bronze medal for boxing ; G. Miles, of Islington, 1st prize in school on obtaining the rating of 1st class boy. H. Anderson, of Ipswich, 1st prize for the "best" kit, and Wm. Mardell, of Camberwell, is captain of the "Impregnable's" first XI. football team.

The boys have been keeping their billets well in the mercantile marine. I regret to report that I have during the past year had to refuse several applications for skilled ratings in the mercantile marine owing to the dearth of boys. This is most disheartening, considering that at the present time I cannot find a case of a boy who has left the ship 3½ years with a good character who is not earning £4 a month and all his food found him in the above service.

Captain Mathias, the Board's shipping officer at Liverpool, continues to find excellent billets for boys in the mercantile marine and keeps the closest touch with them afterwards. Mr. Carnell, the London shipping officer, too, has made some excellent shipments.

It is hoped that during the coming year our entries will increase, and a very large number of exceptionally able boys will join the Exmouth. The prospects for boys at sea are most excellent, and far superior to those on shore.

The officers have worked hard to keep the boys in a high state of efficiency.

It only remains for me, gentlemen, to thank you greatly for your kindness to me during the period of my command.

(Signed) REGINALD B. COLMORE,

Captain R.N. (retired) and

Captain-Superintendent.

TABLE I.—BOYS ADMITTED AND DISCHARGED—1876 TO 1911.

YEAR	1876	1877	1878	1879	1880	1881	1882	1883	1884	1885	1886	1887	1888	1889	1890	1891	1892	1893	1894	1895	1896	1897	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	T'LS.
Admitted	194	494	188	210	289	226	348	350	326	267	374	241	301	329	290	223	322	299	307	278	347	325	323	341	423	413	329	223	294	277	279	242	297	311	322	282	10,884
Discharged to Royal Navy	1	6	1	8	72	85	155	141	95	128	114	95	87	104	108	89	83	102	133	163	137	129	123	149	115	151	116	42	103	96	58	88	86	70	*73	105	3,411
Discharged to Mercantile Marine	53	19	126	115	105	107	109	96	106	91	107	93	141	171	134	75	69	90	87	96	109	112	112	135	145	146	112	93	105	123	115	144	96	94	165	147	3,943
Discharged to Army as musicians	9	11	9	31	17	27	46	74	61	43	55	36	18	56	48	42	66	28	26	37	49	28	32	58	93	56	101	51	17	12	39	13	17	9	11	4	1,330
Discharged to situations	1	..	2	..	3	..	..	..	2	..	..	..	..	..	..	1	..	..	1	..	1	..	..	1	..	1	..	..	1	..	..	..	..	2	..	16	
Discharged to unions by order of Guardians or Committee	21	23	47	30	61	43	27	33	52	39	49	44	45	44	36	18	51	34	54	41	51	29	39	29	39	31	50	47	30	25	69	40	43	53	47	64	1,478
Died..	..	..	2	1	..	4	1	..	2	2	5	1	2	1	1	..	1	3	2	1	3	2	1	1	1	2	2	1	2	..	1	..	1	..	2	49	
Total discharges and deaths	85	59	187	185	258	266	338	344	318	303	330	269	293	376	327	225	270	257	303	338	350	300	307	373	393	387	381	234	258	256	282	285	243	226	299	322	10,227

* Includes 15 to Canadian Navy.

Total number of boys discharged (including deaths).. .. 10,227
Remaining under training 31st December, 1911 657
Total 10,884

TABLE II.

Number of boys admitted from each of the Metropolitan Unions and Country Unions during 1911 and during the whole time the ship has been established.

Year ending Dec. 31st, 1911.	PARISH OR UNION.	From March 31st, 1876, to Dec. 31st, 1911.	Year ending Dec. 31st, 1911.	PARISH OR UNION.	From March 31st, 1876, to Dec. 31st, 1911.
	Number of boys in ship when taken over by Managers.	12	Brt. ford. 189	<i>Country Unions—Con.</i>	Brt. ford. 9,814
	<i>Metropolitan Unions.</i>			Guildford	24
—	Bermondsey	316	3	Hambleton	5
5	Bethnal Green	308	1	Hartney Wintney	1
—	Bloomsbury	43	1	Hartismere	3
24	Camberwell	643	1	Haslingden	5
1	Chelsea	170	1	Hastings	6
11	Fulham	337	3	Hertford	3
4	George's S.	310	—	Hemel Hempstead	4
2	George, S., in-the-East	133	5	Hendon	19
7	Greenwich	488	2	Henley	9
4	Hackney	360	—	Hitchin	5
5	Hammersmith	37	—	Horsham	6
—	Hampstead	36	—	Hatfield	1
2	Holborn	313	2	Ipswich	9
15	Islington	346	—	Isle of Thanet	52
4	Kensington	229	—	Kettering	16
5	Lambeth	514	1	Kingston	90
5	Lewisham	745	1	Kingston-upon-Hull	5
1	London, City of	135	—	Kidderminster	1
3	Marylebone S.	549	—	Leeds	2
5	Mile End	258	—	Leicester	21
6	Paddington	176	—	Lewes	3
7	Pancras S.	510	—	Leigh	1
6	Poplar	469	2	Maidstone	34
1	Shoreditch	162	1	Maidenhead	1
8	Southwark	547	—	Malden	2
1	Stepney	126	—	Martley	4
—	Strand	45	1	Midhurst	1
5	Wandsworth	385	1	Medway	38
—	Westminster	71	—	Mutford and Lothingland	3
1	Whitechapel	187	—	Newbury	1
10	Woolwich	438	1	Newport (Mon.)	1
	<i>Country Unions.</i>		—	Newcastle-under-Lyne	8
148	Andover	4	—	Newmarket	1
1	Aston	2	—	Newhaven	3
—	Banbury	5	1	Northampton	7
—	Basford	3	4	Norwich	18
—	Bath	1	1	Nottingham	23
2	Bedford	23	1	Ormskirk	1
—	Bedwellty	2	1	Orsett	19
—	Blofield	1	—	Oxford	5
—	Bicester	3	—	Pontypridd	1
—	Birmingham	2	—	Portsmouth	2
1	Bolton	1	—	Reigate	13
—	Bradford	3	1	Richmond	22
2	Brentford	15	11	Romford	24
1	Brighton	5	—	Ross	1
4	Bromley	32	—	Rotherham	1
—	Buckingham	1	2	Royston	3
—	Cheadle	1	—	Rye	1
—	Chelmsford	12	—	Salford	2
1	Chertsey	2	5	S. Albans	3
—	Chesterfield	20	1	Sculcoats	6
—	Chichester	1	—	Seisdon	2
—	Chippenham	2	—	Sevenoaks	3
3	Colchester	22	—	Sheffield	1
—	Cosford	2	1	Stafford	3
1	Coventry	2	4	Steyning	22
3	Croydon	96	2	Stockport	22
—	Cuckfield	2	—	Stow	7
1	Dartford	1	—	Strood	64
—	Derby	30	—	Tamworth	3
—	Dewsbury	3	—	Tenterden	1
—	Dorking	6	1	Thakeham	3
7	Eastbourne	25	—	Towcester	1
—	East Retford	2	1	Truro	1
—	Edmonton	3	1	Uxbridge	4
—	Ely	1	5	Warwick	1
—	Epsom	11	1	Watford	46
—	Epping	2	1	Wellingborough	5
1	Eton	6	3	West Ham	221
2	Faith's, S.	2	—	Westhampnett	5
2	Faversham	2	—	Willesden	59
—	Foleshill	1	—	Wilton	6
4	Farnham	17	2	Windsor	5
—	Freebridge Lynn	1	—	Wolstanton and Burslem	2
—	Gateshead	1	—	Worcester	34
2	Gravesend	22	—	Worksop	8
3	Great Yarmouth	14	1	Woodbridge	1
				Wycombe	1
Card. ford. 189	Carried forward	9,814	Total 282	Total	10,884

TABLE III.—BOYS DISCHARGED TO ARMY FROM 1876 TO 1911.

Regiment.	No.	Regiment.	No.	Regiment.	No.
Royal Horse Artillery	1	21st Hussars	2	Lancashire Regiment	9
Royal Artillery	6	Grenadier Guards	8	Leicester Regiment	8
Royal Engineers	2	Coldstream Guards	4	Leinster Regiment	4
3rd Hussars	1	Scots Guards	1	Lincolnshire Regiment	4
4th Hussars	1	Argyle and Sutherland High-landers	21	Liverpool Regiment	3
5th Lancers	2	Oxfordshire Light Infantry	13	Manchester Regiment	86
11th Hussars	1	Northumberland Fusiliers	8	Middlesex Regiment	14
Berkshire Regiment	31	Rifle Brigade	20	Munster Fusiliers	2
Border Regiment	18	Royal Fusiliers	21	Cameron Highlanders	6
Cheshire Regiment	18	Royal Highlanders	3	Northampton Regiment	17
Connaught Rangers	55	Royal Marine Light Infantry	1	Wiltshire Regiment	6
Derbyshire Regiment	21	Royal Scots (Lothian Regiment)	42	Worcester Regiment	18
Devonshire Regiment	2	Scots Fusiliers	26	York and Lancaster Regt.	23
Dorsetshire Regiment	10	Scottish Rifles	14	Yorkshire Light Infantry	42
Dublin Fusiliers	33	Seaforth Highlanders	4	Yorkshire Regiment	10
Duke of Cornwall's Light Infantry	7	Shropshire Light Infantry	2	East Yorkshire Regiment	23
Essex Regiment	39	Somerset Light Infantry	33	Army Hospital Corps	1
Gloucestershire Regiment	6	Staffordshire (North) Regiment	1	Army Medical Corps	11
Highland Light Infantry	13	Staffordshire (South) Regiment	29	East Surrey Regiment	14
Gordon Highlanders	5	Suffolk Regiment	28	Bedford Regiment	7
Inniskilling Fusiliers	9	Surrey Regiment	7	18th Hussars	2
Irish Fusiliers	23	Sussex Regiment	30	"The Queen's" Regiment	2
Irish Rifles	15	South Wales Borderers	18	West Yorkshire Regiment	8
East Kent Regiment	10	Royal Warwick Regiment	46	Cameronian Regiment	4
Kent Regiment	5	Welsh Fusiliers	15	Dragoon Guards	19
King's Own Scottish Borderers	8	Welsh Regiment	36		
King's Royal Rifles	27	West Riding Regiment	1		
Lancashire Fusiliers	53	East Lancashire Regiment	12		
13th Hussars	1	Loyal North Lancashire Regt.	8		
9th Hussars	1	South Lancashire Regiment	17		
20th Hussars	9			Total	1247

ANNUAL REPORT OF THE AMBULANCE COMMITTEE FOR THE YEAR 1911.

Motor traction. The substitution of motor for horse traction was completed at the Eastern Station on the 4th March, and at the South-Eastern Station on the 23rd December last. Arrangements were also made for partly equipping the North-Western and Brook Stations with motor ambulances, but these had not been delivered before the close of the year. In addition to the omnibus already provided for the conveyance of staff at the Queen Mary's Hospital, one has also been provided for Darenth Asylum for a similar purpose.

As an experiment the chassis of one of the large motor omnibuses has been fitted with a body suitable for the conveyance of stores. It is hoped by this means to effect considerable economy in the transport of goods from the Board's Central Stores and from the workshops at Darenth Asylum to the various other institutions of the Board.

Ambulance service for London. The Ambulance Service for accidents in London, which Parliament as long ago as 1909 empowered the London County Council to provide, is still non-existent, consequently the work commenced by the Board in 1904 still continues. During the past year the public has made greater use of the Board's ambulances than in any previous year for the conveyance of cases of accident and non-infectious illness.

In response to a request from the Commissioner of Police of the Metropolis, during the Coronation Festivities of Their Majesties King George V. and Queen Mary. on the 22nd, 23rd and 29th June, 6, 8 and 4 motor ambulances were lent for use on the routes of the Royal Processions. Each ambulance was fitted with one stretcher and one long seat; the necessary nurses and medical stores were supplied by the police. In a letter of thanks from the Commissioner of Police, he stated that the ambulances proved of considerable value. In all, 17 cases were dealt with.

Removals to the Managers' hospitals. On reference to Appendix I. A. (p. 156) it will be seen that the total number of patients removed to the Managers' fever hospitals during the year was 21,099 (*15,229*), and to the smallpox Hospitals 81 (*9*).

Removals to places other than the Managers' hospitals. *Infectious cases.*—Under the powers conferred by section 79, clause 3, of the "Public Health (London) Act, 1891," 686 (*478*) persons suffering from dangerous infectious disorders were during the year conveyed to places other than the Managers' hospitals.

Non-Infectious cases.—2,279 (*1,914*) cases (mental, medical and surgical) availed themselves of the facilities afforded by the Managers for the hire of ambulances for the conveyance of non-infectious cases: of that number 35 (*26*) were accident cases.

The total sum received by the Managers during 1911 for this work was £1,148 10s. 9d. (£977 11s. 6d.) of which £24 17s. 6d. (£16 17s. 6d.) was in respect of the service of nurses, and £983 2s. 0d. (£866 14s. 6d.) or an average of 10s. 7d. (9s. 6d.) a journey, was for the conveyance of non-infectious cases. A large number of infectious cases were conveyed gratuitously owing to the want of means of the patients, and for the same reason the fees paid for non-infectious cases were refunded in a few instances.

Conveyance of imbeciles and children. In addition to the above-mentioned removals, 585 (645) imbeciles, 593 (665) children suffering from ophthalmia, 1 (33) children with ringworm, and 472 (240) defective children were conveyed during the year, making, with 5,066 (4,298) patients conveyed to and from the Children's Hospitals at Carshalton and Hither Green, the medical and surgical cases before mentioned, and 46 (39) staff cases, a total of 9,042 (7,834) non-infectious cases.

Total removals. The aggregate removals during the year, including the transferring of patients from one institution to another, numbered 49,183* (37,240) and the mileage run by the vehicles was 355,945 (283,074).

Nurses' journeys. The journeys made by nurses numbered 22,373 (16,274), and the sum credited to the hospitals for their services amounted to £2,796 12s. 6d. (£2,034 5s. 0d.).

Conveyance of stores. Considerable quantities of goods and stores (including 224,300 (235,000) bundles of wood) have been conveyed to the various institutions.

Work of ambulance stations. Tables A and B (see pp. 156 to 158) show the work performed by the ambulance stations during the year.

The following table briefly summarises the year's work of each station:—

STATION.	Number of removals.	Number of journeys.	Miles run by vehicles.
Eastern	13,698 (9,398)	7,075 (4,703)	90,250 (65,942)
North-Western	3,885 (2,648)	3,625 (2,655)	29,296 (22,637)
Western	13,951 (12,237)	7,035 (5,784)	105,586 (88,690)
Mead	— —	76 (104)	1,207 (1,673)
South-Western (closed 29 Jan., 1910)	— (190)	— (217)	— (2,161)
South-Eastern	12,783 (9,521)	6,950 (5,916)	85,419 (66,638)
Brook	4,866 (3,246)	3,745 (3,100)	44,187 (35,333)
Totals	49,183 (37,240)	28,506 (22,479)	355,945 (283,074)

• The Mead Station continues to be used as the central motor workshop, and the journeys recorded above were those made by an old motor ambulance which is now kept for service purposes only.

The South-Western Ambulance Station remained closed throughout the year.

Italic figures in brackets are the corresponding figures for 1910.

ANNUAL REPORT, 1911,

The following table shows (a) the heaviest day's work, and (b) the heaviest week's work of each station :—

STATION.	(a) Heaviest day's work.		(b) Heaviest week's work.		
	Date.	Removals (including transfers, &c.)	Week ended.	Removals (including transfers, &c.)	Mileage run by vehicles.
Eastern ..	17 Oct.	77 (69)	30 Sep.	378 (383)	2,470 (2,016)
North-Western	6 Dec.	21 (24)	18 Nov.	129 (74)	844 (723)
Western ..	29 Mch.	69 (81)	25 Feb.	303 (312)	2,739 (2,376)
South-Western (closed 29 Jan., 1910)	—	— (15)	—	— (62)	— (646)
South-Eastern	18 Oct.	72 (61)	21 Oct.	346 (204)	2,148 (1,760)
Brook	25 Feb.	34 (20)	25 Feb.	144 (77)	1,367 (1,068)

The average length of journey from each ambulance station was as follows :—

STATION.	Removals from homes to Board's hospitals.		Transfers.	Average of all journeys.
	Miles.		Miles.	Miles.
	Smallpox.	Fever.		
Eastern	13·4 (20)	10·4 (11·2)	26·1 (28·6)	12·7 (14·0)
North-Western	— (—)	7·6 (8·1)	— (21·0)	8·0 (8·5)
Western	— (—)	10·6 (10·7)	40·1 (42·2)	15·0 (15·5)
South-Western (closed 29 Jan., 1910)	— (—)	— (9·0)	— (—)	— (9·9)
South-Eastern	12·4 (12·3)	9·1 (8·3)	35·8 (35·5)	12·3 (9·8)
Brook	15·0 (—)	9·3 (8·4)	36·4 (38·2)	11·8 (11·4)

Station buildings. The ambulance stations are in a satisfactory state of repair, most of the minor repairs and painting having been executed by the staff.

Equipment. In the course of the year 26 horse-drawn vehicles, which were no longer required owing to the introduction of motor vehicles, were sold.

The new vehicles brought into use during the year were one motor omnibus and 13 ambulances. The Board's fleet of motor vehicles consisted, at the end of the year, of 11 omnibuses, 23 ambulances, 1 stores van and an old ambulance which is used for odd purposes.

We have again the satisfaction of recording the continued absence of all serious accidents, and of any accident whatever involving injury to any passenger under our care.

(Signed) W. H. HENDERSON,

Chairman.

Italic figures in brackets are the corresponding figures for 1910.

* In addition the motor 'buses stationed at Queen Mary's Hospital, Carshalton, and at Darenth Asylum conveyed 11,901 staff to or from the local railway stations and ran 13,705 miles.

ANNUAL REPORT OF THE GENERAL PURPOSES COMMITTEE FOR 1911.

The Board's accommodation. Summarising in our last annual report the steps which had been taken by the Managers for giving effect to the recommendations embodied in the memorandum from the Local Government Board on the subject of the then existing vacant accommodation in the institutions under the Managers' control, we pointed out that time had not allowed us to deal fully with the whole of the important issues raised in such memorandum, and that the matters not then dealt with would form the subject of further recommendations.

Our former report dealt with—

- (a) The existing accommodation at the Managers' disposal, and the use to which the margin of unoccupied beds which frequently exists in the fever and smallpox hospitals could be beneficially put ;
- (b) The reserve for smallpox ;
- (c) The seasonal rise and fall of fever, and, in connection therewith, the proposed use of Joyce Green Hospital (previously allocated to smallpox) for fever cases ;
- (d) The suggested treatment in the Managers' institutions of additional diseases, such as measles and whooping cough, puerperal fever and tuberculosis ;
- (e) The extension of the Managers' accommodation for sick and convalescent children ; and
- (f) The requirements for unimprovable imbeciles.

In our further report (on subjects not previously dealt with) which we submitted to the Managers on 11th February last we dealt with the following additional points raised in Sir Arthur Downes' memorandum, viz. :—

- (g) The origin of the provision of the existing accommodation for feeble-minded cases, and the problem which had arisen in connection with those over 16 years of age ;
- (h) The desirability of co-ordinating the Board's work relating to the provision of accommodation for and the classification of mentally defective patients under one central committee in view of the narrow border line which exists between the mentally defective and many certified imbeciles ;
- (i) The allocation of Darenth Asylum as an industrial colony for mentally defective patients ; and
- (k) The additional accommodation required for unimprovable imbeciles, both children and adults.

These and other cognate questions were critically discussed by the Managers, who adopted the whole of the recommendations which were embodied in our report, and which involved, *inter alia* :—

- (i.) The transfer from the control of the Children's Committee to that of the Asylums Committee of the feeble-minded persons for whom the Managers are authorised to make provision by the Local Government Board ;
- (ii.) The removal from Darenth Asylum of the whole of the unimprovable imbeciles then accommodated there ;
- (iii.) The alteration of the name of Darenth Asylum to that of Darenth Industrial Colony ;

- (iv.) The utilisation of Darenth Industrial Colony for the accommodation only of cases now classed as improvable imbeciles and for the feeble-minded hitherto provided for under the Children's Committee, subject to suitable arrangements being made for classification and supervision.

Our recommendations also involved :—

- (v.) An application to the Local Government Board to enlarge the Managers' powers for providing for the feeble-minded by removing the restriction under which pre-existing orders confined the admission of feeble-minded persons to children under 16 years of age ;
- (vi.) The abandonment of the Managers' proposal that a certain number of unimprovable children should be removed from Darenth to the Leavesden and Caterham Asylums ;
- (vii.) An increase by 114 beds of the normal accommodation at Darenth Industrial Colony ; and
- (viii.) An adherence to the Managers' previous decision to utilise the Lower Gore Farm Hospital rather than the Orchard Hospital as an additional asylum for unimprovable imbeciles.

The above proposals (with the exception of so much thereof as had reference to the utilisation of the Lower Gore Farm Hospital) subsequently received the sanction of the Local Government Board, who, however, intimated that they were reluctant to take the responsibility of assenting to this portion of the scheme, as they had reason to believe that the Commissioners in Lunacy—having regard to the special difficulty of dealing with the mentally afflicted in case of fire—would insist on extensive and costly structural alterations being made in order to adapt the temporary buildings of either the Lower Gore Farm or Orchard Hospitals for the accommodation of unimprovable imbeciles. Pending further consideration of this matter, and in view of the large immediate outlay and the length of time which the requisite alterations would have involved, the Local Government Board subsequently intimated their concurrence with the Managers' suggestion that some temporary arrangement should be made for the classification of unimprovable imbeciles, and stated that they would be prepared to assent to the use of the Fountain Hospital for that purpose for one year, subject to such adaptation as might be necessary, and to satisfactory provision being made for the care and supervision of the inmates. Steps were accordingly taken towards the end of the year for the removal to Darenth of the feeble-minded girls then in the Fountain Hospital, and for the allocation of that hospital as a temporary asylum for the accommodation of at least 500 unimprovable imbeciles* to be transferred from Darenth. As soon as these transfers shall have been carried out means will be adopted to give practical effect to the comprehensive scheme for dealing with the treatment of imbeciles and the feeble-minded, which has already been approved in principle both by the Managers and by the Local Government Board.

**Officers'
uniforms.**

The revision and consolidation of the regulations and scales of allowances governing the issue of uniforms to officers and servants at the institutions under the Board's control, which had engaged our attention since April, 1909, were satisfactorily concluded during the early part of the year under review. In a report on this subject which we submitted to the Managers in March last we discussed the causes which had led to the reference ; the procedure which we had adopted in dealing with the question both from an administrative and economical standpoint, and the principles which had guided us in arriving at our decisions. Amongst the more important of these decisions were—

* *The number of inmates to be accommodated at the Fountain (Temporary) Asylum has since been certified by the Local Government Board at 624.*

- (i.) That all officers of the same grade throughout the Board's service should be uniformed alike ;
- (ii.) That the four separate sets of regulations previously existing should be formed into one set and the notes attached to the scales simplified as far as possible ;
- (iii.) That no article of uniform should in any circumstances become the property of an officer or servant ; and
- (iv.) That uniforms should be renewed only when worn out.

The general effect of our proposals will be appreciated when it is borne in mind that the 49 regulations hitherto existing were replaced by 11 consolidated regulations (all notes to the scale being at the same time abolished), and that the materials for men's uniforms were reduced in number from 17 to 10, and for women's dresses from 17 to 12.

Laundry administration. The question as to what alterations (if any) were required in the administration of the laundries at the several institutions under the Board's control (by reason of the fact that these laundries had become factories under the Factory and Workshop Acts of 1901 and 1907) with other matters affecting their management and organisation, formed the subject of a lengthy and comprehensive report which we submitted to the Board on 11th March last. This report embodied recommendations of considerable moment, dealing as they necessarily did, with the various phases of the work carried out in the Board's laundries, whether regarded from an administrative, engineering or domestic point of view. As the result of their consideration of our recommendations hereon, the Managers decided to appoint an expert, for one year, whose duties should be to make periodical visits to the several laundries at the Board's establishments and to report to the Managers upon (i.) matters relating to the efficiency and safety of the machinery thereat ; (ii.) the economical use of materials such as coal, water (whether softened or not), soap, soda, etc., consumed therein ; (iii.) the general efficiency of the staff arrangements ; and (iv.) the organisation and working of the laundries generally and individually. When it is borne in mind that the cost of working the laundries under the Board's control amounts to about £50,000 annually, exclusive of capital charges, and that the cost per 1,000 articles washed at many of such laundries compares by no means favourably with that obtaining at large commercial laundries, the necessity for the appointment of an expert who would have under review from time to time the various economic, administrative, and other questions above referred to will be readily recognised.

Other matters. Other matters which occupied our attention during 1911 were (i.) the appointment of officers to the service generally ; (ii.) a comprehensive re-arrangement of the duties of the clerical staff at the Head Office ; (iii.) the wages and hours of duty of carpenters ; (iv.) a memorial from resident engineers relating to the payment of their salaries, the termination of their appointments, their annual leave, and their responsibility in relation to reports ; (v.) the hours of duty and conditions of service of stokers ; and (vi.) the system of living-in at the Board's institutions, more particularly in its application to married members of the male staff. Upon each and all of the above questions we submitted recommendations which were duly approved by the Board, and the purport of which will be found recorded in the minutes of their proceedings.

(Signed) T. CORNELL,

Chairman.

ANNUAL REPORT OF THE FINANCE COMMITTEE FOR 1911.

General. 1. Many matters of detail have called for consideration during 1911, apart from the more important matters of which a brief record is now submitted as our annual report.

Loans. 2. The amount of loans repaid in the year is £194,126, and, for (i.) General. the fifth consecutive year it has not been found necessary to raise any money on loan. During this period the total amount outstanding has been reduced by no less than £964,634 to £2,451,364, at which it now stands; and under existing arrangements all loans will be entirely discharged by March, 1922.

(ii.) Estimates. For the purpose of the London County Council Money Bill, 1912, a sum of £100,000 has been inserted to meet any capital outlay which the Managers may be called upon to incur during the period ending 30 September, 1913.

Rate estimates. 3. The favourable position of the balances, owing chiefly to the absence of the seasonal rise in infectious admissions, has enabled us to recommend not only a continuation of last year's reduction in the amount of the contributions required, but to further reduce the rate for the first half of the year by 1/8th of a penny in the £, notwithstanding the fact that, in the "year" ending 31 March, 1912, there are eight days more than in the previous "year," and that there is a decrease of nearly £200,000 in the rateable value of the District—the first reduction in the history of the Board—and this on a quinquennial valuation, a time when the Managers naturally look for a substantial increase.

Insurance. 4. At the close of last year, one case, in which half pay was (i.) Workmen's awarded by the County Court, was outstanding, and the half Compensation pay has been continued throughout the year, while a second case Act. in which half pay, originally granted, was stopped towards the end of the year, has been before the County Court, and a reduced amount awarded.

During the year one case has been submitted to arbitration, and a suspensory award, which will not operate while the officer remains in the Managers' service, has been registered; and notice of arbitration has been received towards the close of the year in another case. Other minor claims received during the year (excluding those covered by the standing regulations of the Managers as to sick pay and allowances) have been dealt with by us according to the facts.

The present policy of non-insurance of the Managers' liabilities has, up to the present, been financially advantageous; but until a longer experience is available we are keeping the subject under close review.

(ii.) Third-party Risks. The insurance of third party and other risks in connection with the ambulance service, in excess of £5 for any one accident, but without any limit to the number of accidents in the year, has been continued for a fourth year.

(iii.) Marine. Insurance against marine and other risks in connection with ambulance steamers, wharves, Exmouth and brigantine (including boats, contents, etc.,) has been continued for a further period of three years at the premium at which the business was last placed.

(iv.) Fidelity and cash. The complete arrangements for indemnifying the Managers against losses from theft have been continued in the current year.

Assessments. 5. By arrangement with the local Assessment Committee the rateable value of the South Western Ambulance Station, which has been closed for some time past, has been reduced, while the premises are so unoccupied, as from the 1st January, 1911, from £500 to £125, resulting in a saving in rates of £145 in the year. The reduced assessment of West Wharf and the Mead Station has again been continued, and gives relief to the extent of £398 in rates for the year.

Printing and Stationery. 6. We have from time to time recorded in our annual reports the saving effected by the methods adopted in the printing and stationery arrangements of the Managers since the centralisation thereof in 1897 and the economy resulting from the closer supervision exercised during the last few years ; and we now report that the reduction in total cost has been continued in the past year, during which the total expenditure was £4,560 for some 40 establishments, against £11,232 in 1897, when the establishments open numbered only 24.

Books and forms of account. 7. In continuation of the system of revising books and forms of account, we have approved of the use of a combined form of requisition and order book in respect of about one half (some 20,000) the requisitions received, thus ensuring greater accuracy, whilst reducing clerical work ; and we have similarly modified the forms of several other books of account to attain the same objects. We have also given general authority for all such books, wherever practicable, to be so prepared that the period or " life " of the book shall not be too long, and for the sizes to be reduced and the cost of the bindings cheapened.

Alteration of date of closing accounts. 8. By the Order of 27 March, 1911, the Local Government Board directed that the accounts of the Managers and their officers should, in future, be made up and closed on the last day of each half-year, viz., 31 March and 30 September, instead of on Lady Day or Michaelmas Day, if a Saturday, and if not a Saturday on the Saturday next following. The difficulties arising from having a movable date for closing the accounts—which resulted in a financial year varying from 51 weeks to 53 weeks, and which, apart from being highly inconvenient, rendered comparisons of expenditure and other statistical information difficult—will now be avoided.

Salaries and Wages. 9. In conference with representatives from the Committees concerned, proposals modifying the scale have been approved, (i.) Consolidated and submitted, where necessary, to the Managers. In the case of minor proposals, lists of alterations approved have been reported to the Managers periodically.

(ii.) Payment of salaries. In connection with the Local Government Board's Order altering the date of closing the accounts, payment of the salaries of officers is now made on the last day of each month, instead of on the 25 of the month ; and the regulation as to increases of salaries of subordinate staff has been amended so that such increases shall take effect as from and including the first of the month following the decision of the Committee or Sub-Committee concerned.

Superannuation. 10. Under the provisions of the Superannuation Acts 17 officers (i.) Statistics. have been granted superannuation allowances during the year ended 30 September, 1911, amounting to £982 per annum ; whilst 9 persons in receipt of pensions amounting to £261 per annum have died during the year. The number of pensioners is 237, and the amount of pensions is £12,000 per annum ; but from this amount contributions from other authorities under the Asylums Officers' Superannuation Act, 1909, when settled on appeal, will be deducted.

In addition to the above there are 4 pensioners of Asylum Visiting Committees, towards whose pensions the Managers have agreed to contribute £27 per annum.

(ii.) Addition of years. Three recommendations for additions of years to the actual period of service of officers have been remitted to and considered by us in the year. In one case the circumstances were such as, in our opinion, did not justify us in endorsing the recommendation; but in the other two the proposals were approved by the Managers and by the Local Government Board.

(iii.) Gratuities Four recommendations for gratuities have been submitted to us, and three cases, amounting to £180, were subsequently approved by the Managers.

(iv.) Compulsory retirement at 65 years of age. The operation of the standing order requiring officers to automatically retire on attaining the age of 65 years was suspended in the case of an asylum attendant, as the enforcement of the order in this case would have entailed the retirement of the officer after 18 years' asylums' service without any pension, notwithstanding that the officer had contributed under the Poor Law Officers' Superannuation Act, 1896, for many years, as the Asylums Officers' Superannuation Act, 1909, fixes a minimum service of 20 years before a pension can be awarded, unless the cause is incapacity by reason of injury or illness.

(v.) Asylums Officers' Superannuation Act. A form of rules and declaration to be observed by pensioners when claiming payment of instalments of pensions periodically, based on the model form drawn up by the Commissioners in Lunacy, was adopted by the Managers with the necessary modifications, and was approved (as required by the Act) by the Local Government Board.

(vi.) Return of contributions. Many applications from members of the staff for the return of their contributions on leaving the service have been received and determined during the year.

Miscellaneous.

(i.) Forfeited deposits on specifications. 11. Following the usual practice a sum of £45—forfeited deposits accumulated since September, 1906—has been allocated to the Parishes and Unions.

(ii.) Purchase of supplies from stores by officers. As an experiment, approval has been given to certain stewards, living in separate residences, being allowed to pay for provisions actually supplied to them from stores for the use of their families and visitors (subject to the privilege not being regarded as an emolument) instead of paying fixed charges per head as hitherto.

(iii.) Estimates of cost of works. Eight estimates of cost of works, totalling £23,560, have been remitted to and dealt with by us during the year.

(iv.) Stock-taking. The stocks of goods in store have been verified by the Accountant for a third year, in accordance with the system reported to the Managers, at a saving of over £100 a year, as compared with the previous system.

(v.) Travelling Clerk. Reports of this officer, after his visits of inspection and test examinations without notice, and generally, have been periodically submitted to us, and action taken when necessary.

Abstract of accounts and financial tables. 12. Statements of the year's income and expenditure, balance sheet, and detailed financial and statistical tables are appended hereto.

(Signed)

JACKSON HUNT,

Chairman.

APPENDIX I.—FINANCIAL STATISTICS OF THE DISTRICT.

NOTE.—Unless otherwise stated the following statistics relate to the financial year ended 30 September, 1911.

The Metropolitan Asylum District is coterminous with that of the Metropolitan Unions and Parishes, *i.e.*, the Metropolis, excluding the Inns of Court (Inner and Middle Temples, Gray's Inn and Lincoln's Inn), which during the continuance of certain payments are extra parochial.

The population of the District, as estimated by the Registrar-General at the middle of 1911, was 4,522,628.

The rateable value of the District was £44,582,390 on the 6 April, 1911, being a decrease of £209,794 (0·47 per cent.) during the year.

The produce of one penny in the £ on the rateable value of the District at Michaelmas, 1911, represents £185,687.

The precepts levied by the Managers on the constituent parishes and unions of the District for the year work out at 5·1d. in the £, and the average for the past five years was 5·6d. in the £.

The total expenditure for the year has been £1,033,835 (no Loan Expenditure), and the average for the past five years £1,075,812 (Loan £10,114, and General £1,065,698).

The expenditure on general account for the year was £1,033,835 as against the year's income of £996,859.

The rateable value of the property occupied by the Board is £155,525, and the amount of the rates paid last year was £53,874, of which £28,151 was paid to Metropolitan authorities, and £25,723 to Provincial authorities.

The borrowing powers are limited to $\frac{1}{5}$ th of the rateable value of the District.

No sanctions to borrow were applied for in the year, and there are no sanctions to borrow now unexercised.

No amount was borrowed during the year. The total amount borrowed to 30 September, 1911, was £5,606,799. The amount repaid in the year was £194,127; making the total amount of loans discharged £3,155,435.

The amount of loans outstanding at 30 September, 1911, was £2,451,364, and works out at £5·50 for every £100 of rateable value, and is £0·54 per head of the population of the District as estimated by the Registrar-General at the middle of 1911.

The rates of interest on loans are £2 15s. 0d. per cent. and £3 7s. 1d. per cent. (the latter rate being the equated rate payable on the London County Council Loans), and the average rate of interest at 30 September, 1911, was $3\frac{1}{3}$ per cent.

The number of institutions belonging to the Managers is 45.

The number of persons maintained by the Managers, on the last day of the year ended 30 September, 1911, was—

Permanent staff (excluding Head Office, Central Stores, Laboratories, and Stables)	5,233
Inmates	13,979
Total	<u>19,212</u>

The average daily number of inmates maintained was in—

1907	13,127
1908	13,612
1909	13,687
1910	12,792
1911	13,401

The number of persons in receipt of superannuation allowances at the end of the year was 237, and the superannuation payments, excluding compensation, amounted to £11,952 for the year.

The percentage deductions from the pay of the staff under the Poor Law and Asylum Officers' Superannuation Acts, during the year amounted to £6,977, after allowing for contributions refunded.

Expenditure Account.

1910, to 30 September, 1911.

Cr.

INCOME.

Year 1909-1910.

		£	£	£
By Contributions from Parishes and Unions in the District :—				
In respect of Direct Charges	.. .. .	121,000		129,400
„ Common Charges (on rateable value)—		839,570		904,805
			960,570	1,034,205
Amounts paid by extra Metropolitan Authorities				
For maintenance of patients in hospitals and schools		7,380		9,869
„ boys on Exmouth	.. .. .	6,238		5,290
			13,618	15,159
Interest on balances in hands of bankers, &c.	.. .. .		5,324	4,857
Sundry receipts :—				
Rents of buildings and land (net)	.. .. .	6,378		5,383
Sale of ambulance vehicles and sundry receipts	.. .. .	1,398		1,034
Value of furniture and other stocks brought into account during year	.. .. .	2,594		1,310
Superannuation contributions	.. .. .	6,977		6,226
			17,347	13,953
Total Income	.. .. .		996,859	1,068,174
Balance carried down, being expenditure in excess of income for year	.. .. .		36,976	..

HEADS OF EXPENDITURE.

1909—1910.			1910—1911	
Amount.	Rate in the £.		Amount.	Rate in the £.
£	d.		£	d.
194,373	1·04	Imbeciles	201,823	1·09
312,497	1·68	Infectious sick—	277,790	1·50
17,023	0·09	Fever	24,668	0·13
		Smallpox		
26,698	0·14	Ambulance service—	24,636	0·13
6,088	0·03	Land	6,274	0·03
19,318	0·10	River (including wharves)	20,024	0·11
99,472	0·53	Boys on training ship	153,046	0·83
		Children of various classes		
324,302	1·74	General expenses (including repayment of and interest on loans, printing, &c., and Head Office salaries and expenses)	325,574	1·75
£999,771	5·35		£1,033,835	5·57

(For details see pp. 80-87.)

£1,033,835**£1,068,174**By **Balance** on current account on 2 October, 1910, brought forward 184,007**£184,007**

ANNUAL REPORT, 1911,

APPENDIX III.—Details of Revenue Expenditure for the Year

(Figures for the year 1909—1910 are inserted)

INSTITUTIONS.	DAILY AVERAGE NUMBER		DIRECT CHARGES.			COMMON CHARGES assessable on the Rateable Values of the								
	PATIENTS	BOARD-ED STAFF.	MAINTENANCE OF INMATES.	OTHER DIRECT CHARGES.	Total Direct Charges.	MAINTENANCE OF OFFICERS AND SERVANTS.				BUILDINGS AND ESTABLISHMENTS.				
						Salaries and Wages.	Provisions.	Necessaries.	Uniforms and Sundries.	Works.	Garden-ing.	Furni-		
										Wages, Contracts and Materials.	Wages, Plants, Seeds, &c.	Furni-ture and other Articles.	Bed-ding and Linen.	En-
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
HOSPITALS :—			£	£	£	£	£	£	£	£	£	£	£	£
Eastern	221	191	2,150	...	2,150	8,012	3,443	65	287	626	158	505	382	
	136	153	1,345	...	1,345	6,774	2,799	54	255	520	151	655	245	
North-Eastern	377	279	4,169	...	4,169	10,987	5,147	122	325	819	392	601	671	
	302	270	3,683	3	3,686	10,514	5,219	120	336	916	394	886	668	
North-Western	275	207	2,892	...	2,892	8,621	3,732	100	405	956	155	508	514	
	255	201	2,502	...	2,502	8,588	3,818	98	438	924	155	384	461	
Western	272	220	2,952	...	2,952	8,859	4,272	116	367	805	237	504	413	
	256	217	3,168	...	3,168	8,840	4,305	114	361	968	241	477	471	
South-Western	241	179	2,776	1	2,777	7,405	3,546	94	229	985	156	369	283	
	234	182	2,919	...	2,919	7,211	3,497	91	339	1,069	153	346	354	
Fountain	3	13	41	...	41	647	133	1	5	228	58	13	15	
	8	18	109	...	109	1,256	402	4	35	438	81	61	56	
Grove	274	237	2,911	...	2,911	9,059	4,370	129	309	946	211	455	392	
	221	217	2,390	...	2,390	8,254	4,102	119	362	1,031	212	543	363	
South-Eastern	287	229	2,830	...	2,830	9,071	4,427	101	328	990	139	383	359	
	250	220	2,537	...	2,537	8,713	4,684	104	333	699	160	403	379	
Park (see p.22)	...	...	...	...	...	...	...	...	...	...	...	...	...
	144	153	1,778	...	1,778	6,711	3,089	86	278	1,135	230	394	427	
Brook	283	224	2,992	...	2,992	9,253	4,185	96	368	1,005	304	594	540	
	264	215	3,141	...	3,141	8,667	4,187	97	405	1,008	285	591	448	
Northern	348	196	3,852	13	3,865	7,929	3,941	67	315	785	277	399	253	
	359	205	4,216	4	4,220	8,143	3,959	54	310	846	271	366	331	
Southern	278	184	3,058	2	3,060	7,128	3,307	62	176	831	274	570	244	
	355	201	3,772	1	3,773	7,822	3,662	88	422	1,019	263	599	377	
Smallpox	6	76	170	2	172	3,800	1,826	61	133	944	208	461	81	
	2	61	32	...	32	3,304	1,429	43	226	797	222	277	66	
Carried forward	2,865	2,235	30,793	18	30,811	90,771	42,329	1,014	3,247	9,920	2,569	5,362	4,147	
Carried forward	2,786	2,313	31,592	8	31,600	94,797	45,152	1,072	4,100	11,370	2,818	5,982	4,646	

The Bacteriological Laboratories and Stables and Central Stores working expenditure (see Appendix XIII.) is charged to the set

FINANCE COMMITTEE.

81

from 2 October, 1910, to 30 September, 1911.

under the figures for the year 1910--1911.)

Several Parishes and Unions in the District, irrespective of the number of Inmates chargeable to them.														
No.	Heating, Lighting and Cleansing (including Wages).	RATES, RENT, TAXES, AND INSURANCE.	MEDICINES AND SURGICAL APPLIANCES.	MISCELLANEOUS.		GENERAL EXPENSES.	Total. Columns 6 to 21.	Add or deduct Balances on Farm, Industrial, &c., Accounts. (Deduct unless otherwise stated.)	Total Common Charges excluding Special Expenditure.	EXPENDITURE OF A SPECIAL CHARACTER.			Total Common Charges. Columns 24 and 27.	TOTAL EXPENDITURE FOR YEAR. Columns 5 and 28.
				Stationery, Postage and Office Expenses.	Traveling and Sundry Expenses.					Buildings.	Furniture, &c.	Total.		
(5)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)
£	£	£	£	£	£		£	£	£	£	£	£	£	£
69	3,486	1,533	644	184	44	...	19,545	684	18,859	3,523	...	3,523	22,382	24,532
57	3,133	1,447	492	136	34	...	16,829	448	16,381	5,855	...	5,855	22,236	23,581
52	5,159	3,656	1,251	228	83	...	29,625	...	29,625	953	...	953	30,578	34,747
76	5,033	3,687	1,466	202	52	...	29,699	...	29,699	3,301	...	3,301	33,000	36,686
70	4,157	1,969	691	227	28	...	22,230	308	21,922	1,093	...	1,093	23,015	25,907
48	4,024	1,926	436	184	48	...	21,613	287	21,326	1,941	...	1,941	23,267	25,769
50	4,430	2,643	641	223	28	...	23,664	581	23,083	985	...	985	24,068	27,020
57	4,408	2,529	976	203	34	...	24,042	467	23,575	656	...	656	24,231	27,399
32	5,111	1,802	482	161	26	...	20,772	2	20,770	1,003	...	1,003	21,773	24,550
46	5,019	1,744	704	155	32	...	20,862	97	20,765	2,943	...	2,943	23,708	26,627
1	475	958	1	2	2	...	2,540	...	2,540	18	...	18	2,558	2,599
7	1,093	1,206	8	5	6	...	4,665	...	4,665	19	...	19	4,684	4,793
32	6,204	2,912	463	216	48	...	25,875	2	25,873	395	...	395	26,268	29,179
38	5,811	2,945	345	164	42	...	24,443	(add) 7	24,450	2,474	...	2,474	26,924	29,314
52	4,982	2,430	589	219	35	...	24,219	614	23,605	512	...	512	24,117	26,947
53	4,752	2,305	681	179	31	...	23,564	519	23,045	752	...	752	23,797	26,334
21	4,916	3,185	144	113	79	...	20,861	...	20,861	1,557	...	1,557	22,418	24,196
43	6,095	3,770	621	225	69	...	27,265	352	26,913	1,686	...	1,686	28,599	31,591
45	6,024	3,771	732	184	71	...	26,585	366	26,219	551	...	551	26,770	29,911
31	4,500	2,392	148	227	152	...	21,474	(add) 3	21,477	979	...	979	22,456	26,321
33	4,590	2,635	158	208	128	...	22,093	1	22,092	1,037	...	1,037	23,129	27,349
15	4,591	1,959	161	195	425	...	19,982	35	19,947	1,390	...	1,390	21,337	24,397
31	5,246	2,161	261	236	605	...	22,848	14	22,834	3,931	...	3,931	26,765	30,538
96	4,233	4,613	91	74	494	...	17,159	83	17,076	1,837	5,583	7,420	24,496	24,668
4	3,714	4,329	12	47	460	...	14,951	212	14,739	2,252	...	2,252	16,991	17,023
13	53,423	30,637	5,783	2,181	1,434	...	254,348	2,658	251,690	14,374	5,583	19,957	271,647	302,458
16	57,763	33,870	6,415	2,016	1,622	...	273,055	2,404	270,651	27,269	...	27,269	297,920	329,520

Establishments to which the goods are supplied, and therefore forms part of the above expenditure under the respective heads.

ANNUAL REPORT, 1911,
APPENDIX III.—Details of Revenue Expenditure for the Year
(Figures for the year 1909—1910 are inserted)

INSTITUTIONS.	DAILY AVERAGE NUMBER.		DIRECT CHARGES.			COMMON CHARGES assessable on the Rateable Values of the Institutions.							
	PATIENTS.	BOARD-ED STAFF.	MAINTENANCE OF INMATES.	OTHER DIRECT CHARGES.	Total Direct Charges.	MAINTENANCE OF OFFICERS AND SERVANTS.				BUILDINGS AND ESTABLISHMENTS.			
						Salaries and Wages.	Provisions.	Necessaries.	Uniforms and Sundries.	Works. Wages, Contracts and Materials.	Garden- ing. Wages, Plants, Seeds, &c.	Furni- ture, and other articles.	Bed- ding and Linen.
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
Brought forward ..	2,865	2,235	£ 30,793	£ 18	£ 30,811	£ 90,771	£ 42,329	£ 1,014	£ 3,247	£ 9,920	£ 2,569	£ 5,362	£ 4,147
Brought forward ..	2,786	2,313	31,592	8	31,600	94,797	45,152	1,072	4,100	11,370	2,818	5,982	4,646
AMBULANCE SERVICE :—													
Eastern Station ..	...	28	...	...	...	2,152	481	...	112	81	...	61	18
...	...	28	...	...	...	1,954	516	...	128	101	...	31	11
North Western Station ..	...	17	...	...	...	1,134	339	...	47	73	...	36	8
...	...	19	...	...	...	1,206	357	...	66	63	...	28	11
Western Station ..	...	28	...	...	...	2,085	577	...	59	50	...	42	21
...	...	30	...	...	...	2,119	603	...	126	64	...	130	17
South Western Station....	...	...	...	...	...	141	45	...	...	19	...	...	...
...	...	18	...	...	...	508	165	...	22	36	...	18	10
South Eastern Station....	...	27	...	...	...	2,065	536	...	89	42	...	47	22
...	...	28	...	...	...	1,980	594	...	77	87	...	26	22
Brook Station ..	...	22	...	...	...	1,522	428	...	41	54	...	34	19
...	...	22	...	...	...	1,594	436	...	65	78	...	20	12
Mead Station ..	...	...	...	...	...	135	...	...	3	19	...	24	...
...	...	...	...	...	...	138	13	...	4	102	...	63	...
Tooting Bec ..	...	...	...	...	...	...	...	...	...	...	...	...	...
...
River Service ..	...	16	...	...	...	2,455	423	55	70	190	2	66	33
...	...	16	...	...	...	2,509	404	52	57	180	1	63	88
Totals ..	...	138	...	...	...	11,689	2,829	55	421	528	2	310	111
Totals ..	...	161	...	...	...	12,008	3,088	52	545	711	1	379	171
ASYLUMS :—													
Leavesden ..	2,009	134	17,835	68	17,903	14,666	5,145	60	507	1,882	206	976	1,322
...	1,944	127	17,111	33	17,144	14,283	4,942	50	551	1,735	218	957	1,111
Caterham ..	2,041	226	17,265	26	17,291	13,764	4,801	61	605	2,080	173	917	701
...	1,957	220	17,357	20	17,377	12,963	4,383	62	643	2,185	236	1,062	851
Darenth ..	1,980	258	17,080	9	17,089	13,683	4,887	75	444	2,319	272	939	1,477
...	1,928	262	16,372	16	16,388	13,540	4,970	51	467	2,021	262	793	1,391
Tooting Bec ..	1,050	267	8,206	150	8,356	11,769	4,572	84	396	1,296	311	455	401
...	1,029	269	8 306	132	8,438	11,743	4,532	54	477	996	350	474	381
Totals ..	7,080	885	60,386	253	60,639	53,882	19,405	280	1,952	7,577	962	3,287	3,901
Totals ..	6,858	878	59,146	201	59,347	52,529	18,827	217	2,138	6,937	1,066	3,286	3,741
Carried forward	9,945	3,258	91,179	271	91,450	156,342	64,563	1,349	5,620	18,025	3,533	8,959	8,101
Carried forward	9,644	3,352	90,738	209	90,947	159,334	67,067	1,341	6,783	19,018	3,885	9,647	8,551

The Bacteriological Laboratories and Stables, and Central Stores working expenditure (see Appendix XIII.) is charged to the

FINANCE COMMITTEE.

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from 2 October, 1910, to 30 September, 1911 (continued).
under the figures for the year 1910—1911.)

several Parishes and Unions in the District, irrespective of the number of Inmates chargeable to them.

MENT.		RATES, RENT, AND INSUR- ANCE.	MEDI- CINES AND SURGI- CAL APPLI- ANCES.	MIS- CELLANEOUS.		GENERAL EXPENSES.	Total. Columns 6 to 21	Add or deduct Balances on Farm, Indus- trial, &c., Accounts. (Deduct unless otherwise stated.)	Total Common Charges excluding Special Expendi- ture.	EXPENDITURE OF A SPECIAL CHARACTER.			Total Common Charges. Columns 24 and 27.	TOTAL EXPENDI- TURE FOR YEAR. Columns 5 and 28.
re.	Heating, Lighting, and Cleansing (including Wages).			Station- ery, Postage and Office Ex- penses.	Travel- ing and Sundry Ex- penses. *					Build- ings.	Furni- ture, &c.	Total.		
(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)
£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
543	53,423	30,637	5,783	2,181	1,434	...	254,348	2,658	251,690	14,374	5,583	19,957	271,647	302,458
516	57,763	33,870	6,415	2,016	1,622	...	273,055	2,404	270,651	27,269	...	27,269	297,920	329,520
6	313	229	...	28	1,258	...	4,741	160	4,581	24	3,144	3,168	7,749	7,749
5	289	222	...	19	955	...	4,232	101	4,131	195	452	647	4,778	4,778
1	286	202	...	18	432	...	2,578	255	2,323	...	3	3	2,326	2,326
2	285	199	...	22	433	...	2,674	178	2,496	...	...	...	2,496	2,496
2	305	297	...	22	1,129	...	4,592	567	4,025	...	53	53	4,078	4,078
4	313	300	...	23	783	...	4,485	370	4,115	86	3,481	3,567	7,682	7,682
..	47	77	...	...	...	...	329	...	329	...	...	...	329	329
2	129	196	...	8	163	...	1,264	51	1,213	22	...	22	1,235	1,235
3	303	266	...	33	1,134	...	4,550	283	4,267	57	457	514	4,781	4,781
6	336	253	...	28	1,041	...	4,453	226	4,227	272	510	782	5,009	5,009
3	238	261	...	20	656	...	3,272	31	3,241	...	573	573	3,814	3,814
3	242	267	...	15	759	...	3,493	20	3,473	...	...	...	3,473	3,473
..	90	235	...	8	1,011	...	1,525	...	1,525	19	4	23	1,548	1,548
1	82	224	...	9	1,030	...	1,667	...	1,667	288	70	358	2,025	2,025
..	...	...	...	...	...	...	...	...	...	11	...	11	11	11
..
4	963	1086	2	19	18	...	5,392	...	5,392	882	...	882	6,274	6,274
2	841	1063	3	18	15	...	5,295	...	5,295	793	...	793	6,088	6,088
19	2,550	2,653	2	148	5,638	...	26,979	1,296	25,683	993	4,234	5,227	30,910	30,910
25	2,517	2,724	3	142	5,179	...	27,563	946	26,617	1,656	4,513	6,169	32,786	32,786
86	7,259	1,688	510	258	416	...	35,267	535	34,732	1,961	...	1,961	36,693	54,596
85	7,114	1,688	363	247	439	...	34,034	520	33,514	3,223	...	3,223	36,737	53,881
23	6,483	2,001	394	242	211	...	32,754	add.) 43	32,797	1,630	84	1,714	34,511	51,802
36	6,196	1,978	258	239	215	...	31,629	48	31,581	1,791	459	2,250	33,831	51,208
85	7,884	2,615	183	262	372	...	35,681	3,354	32,327	6,445	534	6,979	39,306	56,395
86	7,549	2,880	174	281	349	...	34,965	3,207	31,758	1,881	...	1,881	33,639	50,027
60	6,046	3,645	171	209	70	...	29,613	44	29,569	1,105	...	1,105	30,674	39,030
81	6,248	3,687	277	216	56	...	29,689	39	29,650	236	933	1,169	30,819	39,257
54	27,672	9,949	1,258	971	1,069	...	133,315	3,890	129,425	11,141	618	11,759	141,184	201,823
88	27,107	10,233	1,072	983	1,059	...	130,317	3,814	126,503	7,131	1,392	8,523	135,026	194,373
16	83,645	43,239	7,043	3,300	8,141	...	414,642	7,844	406,798	26,508	10,435	36,943	443,741	535,191
29	87,387	46,827	7,490	3,141	7,860	...	430,935	7,164	423,771	36,056	5,905	41,961	465,732	556,679

Establishments to which the goods are supplied, and therefore forms part of the above expenditure under the respective heads.

* Includes running expenses of ambulance vehicles.

INSTITUTIONS.	DAILY AVERAGE NUMBER.		DIRECT CHARGES.			COMMON CHARGES assessable on the Rateable Values of the							
	PATIENTS.	BOARD-ED STAFF.	MAINTENANCE OF INMATES.	OTHER DIRECT CHARGES.	Total Direct Charges.	MAINTENANCE OF OFFICERS AND SERVANTS.				BUILDINGS AND ESTABLISHMENTS.			
						Salaries and Wages.	Provisions.	Necessaries.	Uniforms and Sundries.	Works. Wages, Contracts and Materials.	Garden- ing. Wages, Plants, Seeds, &c.	Furniture and other articles.	Furni- Bed- ding and Linen.
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
Brought forward ..	9,945	3,258	91,179	271	91,450	156,342	64,563	1,349	5,620	18,025	3,533	8,959	8,164
Brought forw'd	9,644	3,352	90,738	209	90,947	159,334	67,067	1,341	6,785	19,018	3,885	9,647	8,557
CHILDREN'S HOMES AND SCHOOLS :—													
High Wood ..	324	74	2,876	52	2,928	3,542	1,355	35	56	218	129	242	143
	311	74	2,682	50	2,732	3,513	1,272	35	97	238	132	262	81
White Oak ..	341	73	2,895	44	2,939	3,731	1,315	29	90	366	143	289	212
	339	72	2,862	58	2,920	3,695	1,298	26	99	379	145	396	181
The Downs ..	281	75	2,282	28	2,310	3,781	1,429	42	49	421	90	257	138
	318	80	2,566	35	2,601	4,112	1,455	42	69	534	63	330	250
Queen Mary's Hospital ..	737	281	6,466	12	6,478	9,246	5,275	108	267	893	475	769	394
	814	275	6,933	16	6,949	8,972	4,830	91	242	1,240	455	1,021	658
Park Hospital for Children..	416	222	5,440	2	5,442	7,782	4,102	107	403	1,310	220	749	222
(see p. 22).	...	...	...	...	...	...	...	...	...	...	...	...	...
S. Anne's ..	131	24	1,034	77	1,111	1,172	427	13	21	225	16	71	34
	131	24	1,093	84	1,177	1,175	478	11	25	348	13	51	60
East Cliff ..	124	32	1,078	114	1,192	1,182	663	17	23	232	1	87	26
	124	31	1,100	105	1,205	1,135	685	23	17	218	...	102	52
Millfield ..	119	24	1,316	68	1,384	1,094	460	11	28	171	59	87	40
	118	24	1,251	64	1,315	1,031	471	12	24	222	55	117	19
Bridge ..	191	16	1,923	8	1,931	1,115	290	6	23	225	9	152	128
	167	15	1,813	9	1,822	898	284	4	24	294	11	137	78
Lloyd Street ..	25	4	262	...	262	177	69	9	3	27	1	16	19
	23	4	219	...	219	173	82	8	4	32	2	21	12
Elm Grove ..	13	3	101	...	101	124	52	11	1	30	...	3	3
	13	3	86	...	86	120	60	11	...	13	1	3	2
Earlsfield Road	9	2	86	...	86	87	37	9	2	11	...	9	5
	9	2	112	...	112	82	42	7	1	7	...	6	5
Surrey House..	18	3	160	...	160	117	55	12	4	18	...	11	8
	18	3	179	...	179	112	61	12	...	13	...	12	4
Fountain Hosp'l (Feeble-minded Colony) ..	53	13	503	...	503	483	140	8	18	74	...	42	...

†Pentonville Rd.	...	...	...	...	...	...	...	...	...	...	...	...	...
	27	8	51	3	54	75	38	5	...	9	1	1	...
†Harrow Road	...	...	...	...	...	...	...	...	...	...	...	...	...
	11	4	23	1	24	46	20	3	2	33	1	3	...
†Camberwell Green ..	...	...	...	...	...	...	...	...	...	...	...	...	...
	31	6	40	8	48	80	37	3	9	14	...	4	...
Totals ..	2,782	846	26,422	405	26,827	33,633	15,669	417	988	4,221	1,143	2,784	1,371
Totals ..	2,454	625	21,010	433	21,443	25,219	11,113	293	613	3,594	879	2,466	1,401
Carried forward	12,727	4,104	117,601	676	118,277	189,975	80,232	1,766	6,608	22,246	4,676	11,743	9,531
Carried forward	12,098	3,977	111,748	642	112,390	184,553	78,180	1,634	7,396	22,612	4,764	12,113	9,961

The Bacteriological Laboratories and Stables, and Central Stores working expenditure (see Appendix XIII.) is charged to the
† Houses transferred to the London County Council as from 1st January, 1910.

from 2 October, 1910, to 30 September, 1911 (continued).

under the figures for the year 1910—1911.)

several Parishes and Unions in the District, irrespective of the number of Inmates chargeable to them.

MENT.	Heating, Lighting and Cleansing (including Wages).	RATES, RENT, AND INSURANCE.	MEDICINES AND SURGICAL APPLIANCES.	MISCELLANEOUS.		GENERAL EXPENSES.	Total, Columns 6 to 21.	Add or deduct Balances on Farm, Industrial, &c., Accounts (Deduct unless otherwise stated.)	Total Common Charges excluding Special Expenditure.	EXPENDITURE OF A SPECIAL CHARACTER.			Total Common Charges. Columns 24 and 27.	TOTAL EXPENDITURE FOR YEAR. Columns 5 and 28.
				Stationery, Postage and Office Expenses.	Traveling and Sundry Expenses. *					Buildings.	Furniture, &c.	Total.		
(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)
£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
116	83,645	43,239	7,043	3,300	8,141	...	414,642	7,844	406,798	26,508	10,435	36,943	443,741	535,191
129	87,387	46,827	7,490	3,141	7,860	...	430,935	7,164	423,771	36,056	5,905	41,961	465,732	556,679
27	1,815	1,015	167	88	162	...	9,032	7	9,025	246	...	246	9,271	12,199
11	1,859	992	148	74	170	...	8,908	36	8,872	123	...	123	8,995	11,727
29	1,846	1,319	207	75	116	...	9,813	21	9,792	2,020	...	2,020	11,812	14,751
28	1,874	1,494	202	90	112	...	10,065	26	10,039	948	...	948	10,987	13,907
11	1,394	1,088	118	71	103	...	9,018	3	9,015	125	...	125	9,140	11,450
16	1,369	1,000	141	67	82	...	9,559	(add) 46	9,605	202	...	202	9,807	12,408
59	7,090	2,620	697	236	409	...	28,669	149	28,520	19,195	806	20,001	48,521	54,999
245	6,637	2,480	632	227	382	...	28,307	(add) 104	28,411	1,466	2,070	3,536	31,947	38,896
72	5,939	3,186	353	244	145	...	24,950	...	24,950	1,506	5,750	7,256	32,206	37,648
7	391	207	43	41	84	...	2,763	(add) 5	2,768	...	...	...	2,768	3,879
8	397	206	43	45	91	...	2,960	5	2,955	...	...	...	2,955	4,132
7	497	206	78	40	106	...	3,180	...	3,180	50	...	50	3,230	4,422
14	505	198	83	39	104	...	3,187	2	3,185	2,427	...	2,427	5,612	6,817
6	493	92	16	42	105	...	2,715	8	2,707	285	...	285	2,992	4,376
7	478	81	17	41	124	...	2,712	15	2,697	380	...	380	3,077	4,392
29	667	162	13	28	122	...	2,982	176	2,806	126	...	126	2,932	4,863
20	661	130	11	28	163	...	2,747	255	2,492	100	...	100	2,592	4,414
2	108	75	7	12	20	...	546	...	546	...	...	...	546	808
2	102	76	5	6	21	...	548	...	548	40	...	40	588	807
1	35	31	3	3	7	...	304	...	304	...	...	...	304	405
1	34	31	41	2	8	...	327	...	327	27	...	27	354	440
1	35	12	2	4	7	...	219	...	219	...	...	...	219	305
1	33	12	1	6	7	...	210	...	210	...	...	...	210	322
1	60	20	3	3	8	...	322	...	322	46	...	46	368	528
1	53	20	4	5	9	...	308	...	308	...	...	...	308	487
4	721	235	10	15	17	...	1,772	...	1,772	138	...	138	1,910	2,413
...
...
1	40	75	1	1	2	...	253	...	253	...	...	...	253	307
...
...	20	16	...	2	2	...	148	...	148	...	...	...	148	172
...
1	28	16	1	1	2	...	196	...	196	...	...	...	196	244
256	21,091	10,268	1,717	902	1,411	...	96,285	359	95,926	23,737	6,556	30,293	126,219	153,046
356	14,090	6,827	1,330	634	1,279	...	70,435	189	70,246	5,713	2,070	7,783	78,029	99,472
372	104,736	53,507	8,760	4,202	9,552	...	510,927	8,203	502,724	50,245	16,991	67,236	569,960	688,237
485	101,477	53,654	8,820	3,775	9,139	...	501,370	7,353	494,017	41,769	7,975	49,744	543,761	656,151

Establishments to which the goods are supplied, and therefore forms part of the above expenditure under the respective heads.
 includes running expenses of ambulance vehicles.

ANNUAL REPORT, 1911,

APPENDIX III.—Details of Revenue Expenditure for the Year

(Figures for the year 1909—1910 are inserted)

INSTITUTIONS.	DAILY AVERAGE NUMBER.		DIRECT CHARGES.			COMMON CHARGES assessable on the Rateable Values of the								
	PATIENTS.	BOARD-ED STAFF.	MAINTENANCE OF INMATES.	OTHER DIRECT CHARGES.	Total Direct Charges.	MAINTENANCE OF OFFICERS AND SERVANTS.				BUILDINGS AND ESTABLISH-				
						Salaries and Wages.	Provisions.	Necessaries.	Uniforms and Sundries.	Works.	Garden-	Furni-		
										Wages, Contracts and Materials.	ing. Wages, Plants, Seeds, &c.	Furniture and other articles.	Bedding, and Linen.	En-
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)
			£	£	£	£	£	£	£	£	£	£	£	£
Brot. forward	12,727	4,104	117,601	676	118,277	189,975	80,232	1,766	6,608	22,246	4,676	11,743	9,535	2,114
Brot. forward	12,098	3,977	111,748	642	112,390	184,553	78,180	1,634	7,396	22,612	4,764	12,113	9,962	1,911
TRAIN'G SHIP	674	41	6,909	642	7,551	4,662	1,011	191	300	929	2	710	165	11
EXMOUTH ..	694	42	7,149	730	7,879	3,974	1,067	188	323	1,001	6	699	248	11
CENTRAL STORES }	...	...	...	...	...	...	...	...	...	...	...	...	...	...
LABORATORIES }	...	...	...	...	...	...	...	...	...	...	...	...	...	...
GENERAL EXPENSES														
Office of Board	...	...	...	...	...	22,512	...	...	119	205	1	134	17	...
	...	...	...	...	...	21,822	...	...	137	137	3	323	4	...
Samples and Analysing }	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Litters—	...	...	...	...	...	...	...	...	...	...	...	34	...	...
Depreciation	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Telephones ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...

Insurance, Fire	...	...	...	...	...	...	...	...	...	...	...	...	...	...

Dresden Exhibition }	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Belmont ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Premises ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Loans—														
Instalments	...	...	...	...	...	...	...	...	...	...	...	...	...	...

Interest ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...

Legal Expenses	...	...	...	...	...	...	...	...	...	...	...	...	...	...

Superannuation Allowances and Compensation and Gratuities	...	...	...	...	...	...	...	...	...	...	...	...	...	...

Repayment of Notification Fees ..	...	...	...	...	...	...	...	...	...	...	...	...	...	...

Totals ..	...	...	...	...	...	22,512	...	...	119	205	1	168	17	...
Totals ..	...	...	...	...	...	21,822	...	...	137	137	3	323	4	...
Grand Totals for														
Year 1910 1911	13,401	4,145	124,510	1,318	125,828	217,149	81,243	1,957	7,027	23,380	4,679	12,621	9,717	2,114
Grand Totals for														
Year 1909—1910	12,792	4,020	118,897	1,372	120,269	210,349	79,247	1,822	7,856	23,750	4,773	13,135	10,214	1,911

The Bacteriological Laboratories and Stables, and Central Stores working expenditure (see Appendix XIII.) is charged to the se

FINANCE COMMITTEE.

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from 2 October, 1910, to 30 September, 1911 (continued.)
under the figures for the year 1910—1911.)

several Parishes and Unions in the District, irrespective of the number of Inmates chargeable to them.														
MENT.	Heating, Lighting and Cleansing (including Wages).	RATES, RENT, AND INSUR- ANCE.	MEDI- CINES AND SURGI- CAL APPLI- ANCES.	MIS- CELLANEOUS.		GENERAL EXPENSES.	Total Columns 6 to 21.	Add or deduct Balances on Farm. Indus- trial, &c., Accounts. (Deduct unless otherwise stated.)	Total Common Charges excluding Special Expendi- ture.	EXPENDITURE OF A SPECIAL CHARACTER.			Total Common Charges. Columns 24 and 27.	TOTAL EXPENDI- TURE FOR YEAR. Columns 5 and 28.
				Station- ery, Postage and Office Ex- penses.	Travel- ling and Sundry Ex- penses. *					Build- ings.	Furni- ture, &c.	Total.		
(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)
£	£	£	£	£	£	£	£	£	£	£	£	£	£	£
372	104,736	53,507	8,760	4,202	9,552	...	510,927	8,203	502,724	50,245	16,991	67,236	569,960	688,237
485	101,477	53,654	8,820	3,775	9,139	...	501,370	7,353	494,017	41,769	7,975	49,744	543,761	656,151
94	2,091	610	58	146	369	...	11,365	...	11,365	1,108	...	1,108	12,473	20,024
131	1,870	612	54	154	362	...	10,706	...	10,706	733	...	733	11,439	19,318
...
...	...	...	...	...	...	...	...	...	...	166	...	166	166	166
...
...	...	...	...	...	...	...	...	...	...	584	...	584	584	584
3	654	555	...	2,691	340	...	27,234	...	27,234	221	...	221	27,455	27,455
7	629	517	...	2,804	399	...	26,782	...	26,782	181	...	181	26,963	26,963
...	...	...	...	...	393	...	393	...	393	...	...	...	393	393
...	...	...	...	...	275	...	275	...	275	...	...	...	275	275
...	...	...	...	...	...	...	34	...	34	...	...	...	34	34
...
...	...	1,208	...	...	...	...	1,208	...	1,208	...	...	...	1,208	1,208
...	...	1,209	...	...	...	...	1,209	...	1,209	...	...	...	1,209	1,209
...	...	319	...	...	...	...	319	...	319	...	...	...	319	319
...	...	269	...	...	...	...	269	...	269	...	...	...	269	269
...	...	...	...	...	40	...	40	...	40	...	...	...	40	40
...
...
...	...	...	...	...	...	...	...	...	...	411	...	411	411	411
...	...	...	...	...	...	194,127	194,127	...	194,127	...	...	...	194,127	194,127
...	...	...	...	...	...	187,941	187,941	...	187,941	...	...	...	187,941	187,941
...	...	...	...	...	...	86,120	86,120	...	86,120	...	...	...	86,120	86,120
...	...	...	...	...	...	92,544	92,544	...	92,544	...	...	...	92,544	92,544
...	...	...	...	...	...	300	300	...	300	...	...	...	300	300
...	...	...	...	...	...	205	205	...	205	...	...	...	205	205
...	...	...	...	...	...	12,515	12,515	...	12,515	...	...	...	12,515	12,515
...	...	...	...	...	...	11,312	11,312	...	11,312	...	...	...	11,312	11,312
...	...	...	...	...	...	3,063	3,063	...	3,063	...	...	...	3,063	3,063
...	...	...	...	...	...	2,423	2,423	...	2,423	...	...	...	2,423	2,423
3	654	2,082	...	2,691	773	296,125	325,353	...	325,353	221	...	221	325,574	325,574
7	629	1,995	...	2,804	674	294,428	322,960	...	322,960	592	...	592	323,552	323,552
469	107,481	56,199	8,818	7,039	10,694	296,125	847,645	8,203	839,442	51,574	16,991	68,565	908,007	1,033,835
623	103,976	56,261	8,874	6,733	10,175	294,428	835,036	7,353	827,683	43,844	7,975	51,819	879,502	999,771

establishments to which the goods are supplied, and therefore forms part of the above expenditure under the respective heads.
* Includes running expenses of ambulance vehicles.

LIABILITIES.**LOAN ACCOUNT.**

	Loans.	£	£	£
Loans outstanding 30 September, 1910	2,645,491	
Less Instalments of loans repaid during year	194,127	
Loans outstanding 30 September, 1911		2,451,364
London County Council	£2,325,420		
Public Works Loan Commissioners	125,944		
(See statement, p. 99).		<u>£2,451,364</u>		
Balance.				
Instalments repaid	3,155,435	
Expenditure paid out of current account, and sundry receipts	*297,337	
			<u>3,452,772</u>	
Total on Loan Account				£5,904,136

GENERAL ACCOUNT.**Suspense Adjustment Account.**

	£	£
Donations to certain institutions unexpended at 30 September, 1911	4	
Amounts due from Extra Metropolitan Authorities for main- tenance and treatment of inmates, to be credited to Parishes and Unions when received	6,234	
		6,238

Sundry Creditors.

Tradesmen's accounts and other amounts owing	76,078
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Legacies.

Captain Brown's legacy to the Training Ship (£119), less legal expenses	£115	
William Thomas Farguson's legacy to the Homerton Smallpox Hospital (£100), and accumulated income	£168	
Add interest unapplied	4	
George Dryden's legacy to the Stockwell Smallpox Hospital less books purchased for Hospital Ships	£114	
Balance of residue received in year	1	
George Cook's legacy to Darenth Asylum (£100), less legal expenses	73	
Mrs. M. E. Bates' legacy to the Eastern Hospital (£100), less books purchased	£94	
Add interest unapplied	1	
	95	

Students' Fees for Clinical Instruction.

	Total at 30 Sept., 1910.	In Year to 30 Sept., 1911.	Total at 30 Sept., 1911.
Amounts received from students	£20,667	£936	£21,603
Less amounts paid to medical superintend- ents for clinical instruction	12,636	514	13,150
	<u>£8,031</u>	<u>422</u>	<u>£8,453</u>
Less			
Amount transferred in reduction of outlay as estimated cost of provision of buildings for instruction (Park Hospital, £1,750, and Grove Hospital, £750)	£2,500		
Amount applied towards cost of erection of Bacteriological Laboratories	5,000		
			<u>7,500</u>
			953

Balance on Current Account.

Net balance in favour of Parishes and Unions in the District		147,031	
Total on General Account			230,870
Grand Total			£6,135,006

* In addition to these figures, large amounts of expenditure of a capital nature

at 30 September, 1911.

PROPERTY ASSETS AND CAPITAL OUTLAY.**LOAN ACCOUNT.****Capital Outlay.**

Land, buildings, fittings, and furniture (original cost)	£
(For details, see statement p. 99).					*5,904,136

Total on Loan Account	..	£5,904,136
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GENERAL ACCOUNT.**Stock.**

Goods at central stores and at the various institutions, including unused	£
railway tickets and postage stamps	99,014

Sundry Debtors.

Extra-Metropolitan Authorities and other sundry debtors	6,364
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Legacies (Investment Accounts).

Brown's legacy—£104 14s., 3½ per cent stock, London County Council (Metropolitan Board of Works) (at cost)	£
Ferguson's legacy—£173 17s. 2d., consols (at cost)	..	..	115
Dryden's legacy—£124 3s. 0d., consols (at cost)	..	..	168
Cook's legacy—£75 18s. 4d., consols (at cost)	..	..	114
Bates' legacy—£100, 3 per cent. stock, London County Council (at cost)	..	..	73
	..	..	94
			<u>564</u>

Cash.

London County and Westminster Banking Company, Limited—	£	£
Balance in their hands	139,669	
Less unrepresented cheques	19,599	
	<u>120,070</u>	
Cheques drawn in advance for payments for ensuing year	2,500	
	<u>122,570</u>	
Accounting officers—balances in their hands	2,358	
	<u>124,928</u>	

Total on General Account	230,870
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Grand Total	£6,135,006
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exceeding £500,000 have from time to time been defrayed out of the current rates.

MORRIS HEYES, A.C.A.,
Treasurer and Accountant to the Board.

APPENDIX V.—Details of Expenditure in respect of Capital Outlay.

INSTITUTION.	Expenditure at 2 October, 1910		Expenditure in year to 30 Sept., 1911.		Total Expenditure at 30 September, 1911.		
	Land.	Buildings, &c.	Land.	Buildings, &c.	Land.	Buildings, &c.	TOTAL.
Asylums—	£	£	£	£	£	£	£
Leavesden	20,126	210,420	..	..	20,126	210,420	230,546
Caterham	14,965	216,789	..	..	14,965	216,789	231,754
Darenth	16,148	341,976	..	5,767	16,148	347,743	363,891
Tooting Bec	27,682	303,159	..	..	27,682	303,159	330,841
Belmont	411	129,623	..	..	411	129,623	130,034
Clapton .. .. .	..	2,551	..	..	..	2,551	2,551
Totals for Asylums	79,332	1,204,518	..	5,767	79,332	1,210,285	1,289,617
Hospitals—							
Eastern	29,826	98,527	..	3,014	29,826	101,541	131,367
North Eastern	25,673	163,188	..	..	25,673	163,188	188,861
North Western	28,845	142,619	..	..	28,845	142,619	171,464
Western	29,488	199,911	..	..	29,488	199,911	229,399
South Western	16,781	151,236	..	..	16,781	151,236	168,017
Fountain	12,376	143,232	..	..	12,376	143,232	428,803
Grove .. .. .	..	273,195	..	..	..	273,195	..
South Eastern	12,318	258,913	..	..	12,318	258,913	271,231
Brook	16,610	305,228	..	..	16,610	305,228	321,838
Northern	13,747	184,143	..	..	13,747	184,143	197,890
Southern (Upper)	19,699	183,395	..	..	19,699	183,395	384,070
Do. (Lower) .. .. .	..	180,976	..	..	..	180,976	..
Smallpox—Hospital Ships	..	47,538	..	..	..	47,538	..
Do. Long Reach	33,979	66,373	..	..	33,979	66,373	263,432
Do. Orchard .. .. .	..	115,542	..	..	..	115,542	..
Do. Joyce Green	27,732	362,726	..	..	27,732	362,726	390,458
Totals for Hospitals	267,074	2,876,742	..	3,014	267,074	2,879,756	3,146,830
Bacteriological Laboratories and Stables .. .. .	..	12,048	..	..	..	12,048	12,048
Land Ambulance Stations—							
Eastern .. .. .	..	2,675	..	..	..	2,675	2,675
North Western	5,100	15,442	..	..	5,100	15,442	20,542
Western .. .. .	..	4,111	..	..	..	4,111	4,111
South Western	2,172	13,976	..	..	2,172	13,976	16,148
South Eastern .. .. .	..	1,625	..	..	..	1,625	1,625
Brook .. .. .	..	16,448	..	..	..	16,448	16,448
Mead .. .. .	..	34,949	..	..	..	34,949	34,949
Tooting Bec .. .. .	..	1,567	..	..	..	1,567	1,567
Totals for Land Ambulance Service	7,272	90,793	..	..	7,272	90,793	98,065
River Ambulance Service—							
South Wharf	13,119	34,447	..	..	13,119	34,447	47,566
North Wharf	3,558	7,404	..	..	3,558	7,404	10,962
West Wharf	5,652	8,906	..	..	5,652	8,906	14,558
Steamers .. .. .	..	40,988	..	..	..	40,988	40,988
Totals for River Ambulance Service	22,329	91,745	..	..	22,329	91,745	114,074
Training Ship Exmouth .. ..	..	100,890	..	..	..	100,890	100,890
Children's Homes and Schools—							
High Wood	2,300	104,186	..	..	2,300	104,186	106,486
White Oak	5,300	127,204	..	..	5,300	127,204	132,504
The Downs .. .. .	..	99,922	..	..	..	99,922	99,922
Queen Mary's Hospital	15,853	265,674	..	19,352	15,853	285,026	300,879
Park	22,759	255,793	..	..	22,759	255,793	278,552
St. Anne's .. .. .	..	16,037	..	..	..	16,037	16,037
East Cliff	2,356	17,419	..	..	2,356	17,419	19,775
Millfield	850	26,675	..	..	850	26,675	27,525
Bridge .. .. .	..	11,059	..	..	..	11,059	11,059
Lloyd House .. .. .	..	650	..	..	..	650	650
Elm Grove .. .. .	..	1,000	..	..	..	1,000	1,000
Kingwood Road .. .. .	..	1,480	..	..	..	1,480	1,480
Earlsfield Road .. .. .	..	690	..	..	..	690	690
Surrey House .. .. .	..	1,050	..	..	..	1,050	1,050
Pentonville Road .. .. .	..	3,534	..	..	..	3,534	3,534
Harrow Road .. .. .	..	3,715	..	..	..	3,715	3,715
Camberwell Green .. .. .	..	5,196	..	..	..	5,196	5,196
Totals for Children's Homes and Schools	49,418	941,284	..	19,352	49,418	960,636	1,010,052
Central Stores	4,250	17,199	..	..	4,250	17,199	21,449
Office of the Board	53,700	57,409	..	..	53,700	57,409	111,109
GRAND TOTALS	£ 483,375	5,392,628	..	28,133	483,375	5,420,761	5,904,136

NOTE I.—The expenditure under “Land” includes, in certain instances, premises acquired with the site, but where the buildings are utilised for the purpose for which the capital outlay has been incurred, the total expenditure on the purchase is inserted under the head of “Buildings, &c.”

NOTE II.—Large amounts additional to those tabulated have been defrayed out of current funds.

PENDIX VI.—Statement showing the Loans raised, repaid, outstanding, increase or decrease, and the average rate per cent. of interest on Loans raised and Loans outstanding, together with the Expenditure out of Loans Account—each year from 1868 to 1911.

30 September.	LOANS.				Average Rate per cent. of Interest on Loans.		EXPENDITURE OUT OF LOANS ACCOUNT.								
	Raised.	Repaid.	Out-standing at end of each year.	Increase each year. Decreases marked—	Raised.	Out-standing at end of each year.	Asylums.	Hospitals.	Ambulance Service.	Train-ing Ship Ex mouth	Chil-dren's Homes and Schools.	Central Stores.	Office of the Board.	Total	
	£	£	£	£	£	£	£	£	£	£	£	£	£	£	
68	42,100	..	42,100	42,100	3.87	..	16,345	16,254	..	..	..	..	..	32,599
69	127,106	2,438	166,768	124,668	3.87	..	81,139	32,016	..	..	..	..	..	113,155
70	290,794	9,000	448,562	281,794	3.87	..	143,959	88,827	..	..	..	..	..	232,786
71	40,000	..	492,333	43,771	3.93	..	48,594	77,786	..	..	..	..	..	126,380
72	29,473	17,198	504,608	12,275	3.87	..	9,673	8,674	..	..	..	..	..	18,347
73	23,797	9,270	519,136	14,528	3.87	..	17,504	11,087	..	..	..	..	..	28,591
74	7,800	9,425	517,510	1,626	3.87	..	3,678	1,331	..	..	..	..	..	5,009
75	38,930	9,996	546,333	28,823	3.92	..	21,247	845	..	..	..	..	..	22,092
76	50,000	..	596,333	50,000	3.75	..	20,608	5,488	..	2,570	..	..	..	28,666
77	100,000	24,841	671,492	75,159	3.75	..	15,333	89,558	..	19,765	..	..	..	124,656
78	46,575	15,156	702,910	31,418	3.75	..	61,133	7,418	..	36	..	..	..	68,587
79	100,000	18,319	784,591	31,681	3.75	..	57,533	5,200	..	..	..	..	..	62,733
80	42,650	18,494	808,748	24,157	4.17	..	59,404	5,467	..	..	..	..	..	64,871
81	28,950	20,146	817,551	8,803	4.14	..	30,615	1,264	..	..	..	..	..	31,879
82	25,300	1,426	841,425	23,874	3.50	..	6,552	11,000	..	..	..	..	..	17,552
83	12,030	47,910	805,545	35,880	3.50	..	16,638	23,226	4,379	..	..	..	..	44,243
84	105,350	27,685	883,210	77,665	3.50	..	5,834	90,516	29,793	613	..	..	..	126,756
85	179,541	29,636	1,033,114	149,904	3.50	..	11,722	80,870	11,037	1,178	..	..	..	104,807
86	102,809	38,434	1,097,490	64,376	3.50	..	21,656	53,834	9,571	2,877	..	..	..	87,938
87	10,973	41,251	1,067,212	30,278	3.50	..	33,269	4,603	232	35	..	..	..	38,139
88	52,939	40,024	1,080,127	12,915	3.50	..	18,167	9,634	75	19	..	..	..	27,895
89	12,892	42,085	1,050,935	29,192	3.50	..	1,920	45,341	..	..	..	..	..	47,261
90	10,400	43,220	1,018,115	32,820	3.50	..	1,299	12,841	..	..	..	..	..	14,140
91	5,050	43,007	980,157	37,958	3.50	..	1,057	197	..	..	..	..	..	1,254
92	16,644	43,262	953,539	26,618	3.50	..	6,237	36,093	2,382	..	..	..	..	44,717
93	95,295	45,643	1,003,191	49,652	3.50	..	346	54,222	1,439	..	..	..	..	56,007
94	175,366	45,564	1,132,993	129,802	3.43	..	27,339	161,415	10,417	..	..	..	..	199,171
95	485,928	55,077	1,563,844	430,851	3.00	..	8,364	374,124	12,550	..	..	..	..	395,038
96	262,198	84,051	1,741,992	178,148	2.77	..	2,143	294,669	29,214	..	..	..	..	326,026
97	392,096	94,436	2,039,651	297,659	2.75	..	11,610	399,252	19,139	2,770	..	..	..	432,771
98	283,036	108,668	2,214,019	174,368	2.78	..	9,287	178,282	6,915	..	31,650	..	56,675	282,809	
99	164,881	117,158	2,261,742	47,723	2.75	..	485	120,490	854	..	4,980	..	30,861	157,670	
00	183,012	123,872	2,320,882	59,140	3.07	3.17	35,513	88,325	..	..	3,790	..	14,633	142,261
01	294,756	102,945	2,512,693	191,811	3.50	3.20	88,495	132,465	545	515	40,901	..	3,934	266,855	
02	748,050	110,322	3,150,422	637,729	3.50	3.25	106,045	554,035	51,294	..	196,465	..	3,750	911,589	
03	519,124	166,353	3,503,193	352,771	3.37	3.25	151,645	85,346	500	..	94,652	4,250	607	337,000	
04	226,280	*184,881	3,544,592	41,399	3.62	3.25	19,804	117,138	1,419	12,138	43,149	..	349	193,997	
05	210,354	*196,724	3,558,222	13,630	3.48	3.25	35,428	139,374	206	46,024	10,551	..	..	231,583
06	64,320	206,544	3,415,998	142,224	3.75	3.33	10,348	99,294	..	1,303	1,360	..	..	112,305
07	..	209,209	3,206,789	209,209	..	3.31	22,999	15,880	..	8,533	..	..	..	47,412
08	..	181,745	3,025,044	181,745	..	3.34	3,160	..	..	..	..	..	..	3,160
09	..	*184,399	2,840,645	184,399	..	3.34	..	..	..	..	..	..	..	..
10	..	*195,154	2,645,491	195,154	..	3.34	..	..	..	..	..	..	..	..
11	..	194,127	2,451,364	194,127	..	3.35	..	..	..	..	..	..	..	..
12	5,606,799	3,159,095	2,451,364	..	..	..	1,244,127	3,533,686	191,961	98,376	427,498	4,250	110,809	5,610,707

Includes extraordinary repayments of principal—in 1904 £1,263, in 1905 £250, in 1909 £2,703, in 1910 £968 and £7,213 liability in respect of Remand Homes taken over by the London County Council.

Includes £3,660 repaid to the Public Works Loans Board during the years 1869-70, and subsequently raised again on loan the Metropolitan Board of Works.

NOTE.—The expenditure out of loans is allocated to the several services at the time the loan is raised. In a few cases the buildings are being used for purposes other than that contemplated at the time of erection, but no adjustment is made in the above figures.

APPENDIX VII.—Statement showing the Current Account Expenditure
Total Net Expenditure met out of Rates, and Rate in the £—each

Year ended 30 September	CURRENT ACCOUNT EXPENDITURE, EXCLUDING LOAN CHARGES AND SPECIAL EXPENDITURE.										CURRENT ACCOUNT RECEIPTS.					NET EXPENDITURE EXCLUDING LOAN CHARGES AND SPECIAL EXPENDITURE	
	INSTITUTIONS.					GENERAL EXPENSES.					Total.	Maintenance of Extra Metropolitan Patients	Interest on Balances.	Superannuation Contributions.	Sundry other Receipts.	Total.	Amount Col. 11 less col. 16
	Asylums.	Hospitals.	Ambulance Service.	Training Ship Exmouth.	Children's Homes and Schools.	Office of the Board.	Law Charges and other General Expenses.	Superannuation Allowances and Gratuities.	Repayment of Notification Fees.								
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	
	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	£	
1867	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
1868	132	13	..	..	..	2,394	..	..	..	2,539	..	..	..	..	..	2,539
1869	638	835	..	..	..	1,949	22	..	..	3,444	..	..	..	..	..	3,444
1870	1,226	5,473	..	..	..	1,915	61	..	..	8,675	..	..	..	..	..	8,675
1871	59,204	48,905	..	..	..	2,946	135	..	..	111,190	..	..	..	..	..	111,190
1872	74,890	39,826	..	..	..	3,089	1,227	..	..	119,032	..	..	..	1,905	1,905	117,127
1873	86,462	20,862	..	..	..	3,032	1,022	..	..	111,378	..	1,190	..	..	1,190	110,188
1874	91,722	21,680	..	..	..	2,866	450	..	..	116,718	..	..	..	1,789	1,789	114,929
1875	99,294	28,203	..	..	..	3,743	317	..	..	131,557	..	1,000	..	1,673	2,673	128,884
1876	108,165	26,972	..	3,573	..	3,653	290	..	..	142,653	..	1,000	..	1,775	2,775	139,878
1877	106,775	83,703	..	12,388	..	4,543	380	..	..	207,789	..	..	..	2,000	2,000	205,789
1878	107,328	74,565	..	20,115	..	4,742	1,954	..	..	208,704	..	1,000	..	2,852	3,852	204,852
1879	107,564	57,449	..	19,616	..	5,107	5,128	..	..	194,864	..	1,500	..	3,819	5,319	189,545
1880	114,153	59,041	..	19,767	..	4,766	2,026	..	..	199,753	..	1,500	..	3,817	5,317	194,436
§1881	150,222	159,322	..	21,059	..	5,485	1,660	..	..	337,768	..	1,000	..	3,553	4,553	333,215
§1882	160,693	149,266	7,916	23,368	..	6,101	5,799	..	..	353,143	..	..	..	6,662	6,662	346,481
§1883	161,651	132,138	10,579	22,142	..	6,691	3,334	..	..	336,535	..	..	..	4,253	4,253	332,282
§1884	154,032	259,367	41,098	23,547	..	7,758	18,352	..	..	504,154	..	..	..	3,967	3,967	500,187
§1885	160,235	215,789	33,032	21,699	..	9,695	9,121	..	..	449,571	..	..	..	3,947	3,947	445,624
1886	124,032	67,432	15,856	18,431	..	9,737	4,050	..	..	239,538	..	..	..	4,528	4,528	235,010
1887	125,119	65,184	10,985	18,642	..	11,546	1,749	..	..	233,225	..	2,094	..	10,880	12,974	220,251
1888	123,081	139,869	12,417	17,350	..	11,174	350	..	..	304,241	..	650	..	..	650	303,591
1889	130,218	89,809	16,300	19,390	..	9,295	991	185	..	266,188	..	2,086	..	3,943	6,029	260,159	
1890	129,724	112,437	12,368	18,823	..	10,283	1,572	423	1,852	287,482	26	1,778	..	1,003	2,807	284,675	
1891	137,782	135,446	11,080	19,100	..	11,161	1,944	790	3,421	320,724	..	890	..	109	999	319,725	
1892	144,386	210,890	16,059	19,732	..	12,617	1,399	937	3,300	409,320	..	341	..	40	381	408,939	
1893	145,302	285,653	25,361	20,296	..	15,784	1,864	1,012	5,278	500,340	228	..	..	41	269	500,071
1894	140,866	270,586	27,430	21,414	..	17,699	2,598	1,122	8,189	489,904	142	..	..	202	344	489,560
1895	148,439	233,926	26,746	22,029	..	13,090	3,534	1,335	3,487	452,586	2,376	..	..	1,171	3,547	449,039
1896	139,455	271,093	28,246	18,616	..	16,584	3,782	1,460	5,413	484,649	3,164	..	..	..	3,164	481,485
1897	133,924	294,664	30,406	18,176	..	16,701	6,443	1,640	5,636	507,590	2,875	754	..	..	3,629	503,961
1898	140,135	319,069	30,739	18,857	4,530	17,063	2,994	2,034	5,347	540,768	2,627	1,454	..	..	4,081	536,687
1899	151,994	340,016	28,754	23,177	6,920	17,726	2,349	2,448	4,287	577,671	3,084	1,906	..	421	5,411	572,260	
1900	147,455	353,868	29,095	19,198	6,599	20,715	3,889	2,790	4,812	588,421	7,019	3,448	..	..	10,467	577,954
1901	164,323	377,723	31,240	20,772	12,430	25,623	7,006	3,201	3,781	646,099	9,737	3,600	..	..	13,337	632,762
1902	164,749	455,300	49,114	18,627	17,260	25,249	2,058	4,355	7,016	743,728	16,903	993	..	..	17,896	725,832
1903	184,811	358,570	38,095	18,230	33,996	25,768	2,189	4,924	6,471	673,054	8,425	1,743	..	3,976	14,144	658,910	
1904	190,748	296,946	33,946	17,458	50,048	26,286	2,307	5,466	3,980	627,185	8,434	4,943	4,530	6,390	24,297	602,888	
1905	192,690	310,183	30,843	17,776	57,336	26,573	2,204	6,896	3,631	648,132	10,880	3,754	4,858	5,101	24,593	623,539	
1906	192,141	338,338	31,952	17,371	55,577	26,828	2,188	7,303	3,802	675,500	6,567	4,776	6,477	4,773	22,593	652,907	
1907	190,467	368,312	33,693	18,290	54,597	26,554	2,780	8,147	4,354	707,194	15,498	6,559	6,669	2,421	31,147	676,047	
1908	194,255	396,368	35,564	17,745	57,161	26,354	2,048	9,140	4,155	742,790	16,519	3,548	6,156	4,217	30,440	712,350	
1909	186,701	357,545	32,587	17,637	77,801	26,539	2,539	10,306	3,541	715,196	17,383	2,355	6,309	6,639	32,686	682,510	
1910	185,850	302,251	26,617	18,585	91,689	26,782	1,958	11,312	2,423	667,467	15,159	4,857	6,226	7,727	33,969	633,498	
1911	190,064	282,501	25,683	18,916	122,753	27,234	2,294	12,515	3,063	685,023	13,618	5,324	6,977	10,370	36,289	648,734	

* Special expenditure includes expenditure on works of a permanent character. Prior to year ended 30 September
§ The large expenditure under Asylums during each of these years is accounted for by the fact that it has been for patients.

† The rate in the £ is calculated on the basis of the rateable values in force at 30 September each year.

NOTES.—The salaries and wages for the years 1904-11 include the contributions of the Staff under the Superannuation. The Bacteriological Laboratories and Stables and Central Stores working expenditure (see p. 103) is charged. In considering this table regard should be had to the great increase in the Board's work.

Receipts and Net Expenditure, Loan Charges, Special Expenditure and
Year from 1863 to 1911.

LOAN CHARGES				TOTAL NET EXPENDITURE. EXCLUDING SPECIAL.		* SPECIAL EXPENDITURE.							TOTAL NET EXPENDITURE MET OUT OF RATES.		Year ended 30 September
Interest.	Repayment.	Total.	† Rate in the £.	Amount. Columns 17 and 21.	† Rate in the £.	Asylums.	Hospitals.	Ambulance Service.	Training Ship Exmouth	Children's Homes and Schools.	Office of the Board, Central Stores, &c.	Total.	Amount. Columns 23 and 31.	† Rate in the £.	
(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)	(30)	(31)	(32)	(33)	
£	£	£	d.	£	d.	£	£	£	£	£	£	£	£	d.	
..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1867
..	..	..	..	2,539	.03	..	..	..	..	..	..	..	2,539	.03	1868
2,502	2,438	4,940	0.06	8,384	.11	..	..	..	..	..	..	..	8,384	.11	1869
17,917	9,000	26,917	0.36	35,592	.48	..	..	..	..	..	..	..	35,592	.48	1870
13,837	..	13,837	0.17	125,027	1.51	..	..	..	..	..	..	..	125,027	1.51	1871
24,402	17,198	41,600	0.50	158,727	1.92	..	..	..	..	..	..	..	158,727	1.92	1872
20,292	9,270	29,562	0.36	139,750	1.69	..	..	..	..	..	..	..	139,750	1.69	1873
20,342	9,425	29,767	0.35	144,696	1.70	..	..	..	..	..	..	..	144,696	1.70	1874
20,540	9,996	30,536	0.35	159,420	1.84	..	..	..	..	..	..	..	159,420	1.84	1875
15,908	..	15,908	0.16	155,786	1.62	..	..	..	..	..	..	..	155,786	1.62	1876
30,498	24,841	55,339	0.57	261,128	2.68	..	..	..	..	..	..	..	261,128	2.68	1877
27,340	15,156	42,496	0.44	247,348	2.54	..	..	..	..	..	..	..	247,348	2.54	1878
29,230	18,319	47,549	0.48	237,094	2.39	..	..	..	..	..	..	..	237,094	2.39	1879
30,091	18,494	48,585	0.48	243,021	2.39	..	..	..	..	..	..	..	243,021	2.39	1880
31,862	20,146	52,008	0.50	385,223	3.70	..	..	..	..	..	..	..	385,223	3.70	1881
24,226	1,426	25,652	0.23	372,133	3.27	..	..	..	..	..	..	..	372,133	3.27	1882
39,518	47,910	87,428	0.75	419,710	3.62	..	..	..	..	..	..	..	419,710	3.62	1883
32,983	27,685	60,668	0.52	560,855	4.76	..	..	..	..	..	..	..	560,855	4.76	1884
36,193	29,636	65,829	0.55	511,453	4.26	..	..	..	..	..	..	..	511,453	4.26	1885
38,539	38,434	76,973	0.63	311,983	2.55	..	..	..	..	..	..	..	311,983	2.55	1886
40,952	41,251	82,203	0.65	302,454	2.39	..	..	..	..	..	..	..	302,454	2.39	1887
39,939	40,024	79,963	0.63	383,554	3.01	..	..	..	..	..	..	..	383,554	3.01	1888
40,164	42,085	82,249	0.64	342,408	2.66	..	..	..	..	..	..	..	342,408	2.66	1889
39,051	43,220	82,271	0.63	366,946	2.80	..	..	..	..	..	..	..	366,946	2.80	1890
37,596	43,007	80,603	0.62	400,328	3.06	..	..	..	..	..	..	..	400,328	3.06	1891
36,395	43,262	79,657	0.58	488,596	3.57	..	..	..	..	..	..	..	488,596	3.57	1892
37,156	45,643	82,799	0.59	582,870	4.18	..	..	..	..	..	..	..	582,870	4.18	1893
39,747	45,564	85,311	0.60	574,871	4.09	..	..	..	..	..	..	..	574,871	4.09	1894
46,312	55,077	101,389	0.71	550,428	3.88	..	..	..	..	..	..	..	550,428	3.88	1895
56,422	84,051	140,473	0.95	621,958	4.19	..	..	..	..	..	..	..	621,958	4.19	1896
63,367	94,436	157,803	1.05	661,764	4.42	..	..	..	..	..	..	..	661,764	4.42	1897
69,692	108,668	178,360	1.18	715,047	4.72	..	..	..	..	..	..	..	715,047	4.72	1898
71,955	117,158	189,113	1.24	761,373	4.97	..	..	..	..	..	..	..	761,373	4.97	1899
73,274	123,872	197,146	1.27	775,100	4.98	17,754	22,794	2,146	251	1,954	2,000	46,899	821,999	5.28	1900
76,863	102,945	179,808	1.09	812,570	4.92	12,989	22,302	1,094	886	4,429	..	41,700	854,270	5.17	1901
92,521	110,322	202,843	1.22	928,675	5.57	12,093	34,291	11,304	245	7,947	669	66,549	995,224	5.97	1902
11,047	166,353	277,400	1.64	936,310	5.54	9,073	133,983	17,320	273	11,257	770	172,676	1,108,986	6.57	1903
15,215	183,618	298,833	1.75	901,721	5.28	20,476	47,505	2,107	253	3,827	2,012	76,180	977,901	5.72	1904
16,640	196,474	313,114	1.81	936,653	5.41	16,685	48,006	2,662	470	5,729	1,899	75,451	1,012,104	5.84	1905
14,910	206,544	321,454	1.78	974,361	5.39	8,463	39,782	2,951	394	6,222	534	58,346	1,032,707	5.71	1906
11,772	209,209	320,981	1.77	997,028	5.48	14,242	42,005	5,854	103	7,234	758	70,196	1,067,224	5.88	1907
03,480	181,745	285,225	1.55	997,575	5.42	25,491	43,241	4,391	62	2,067	15,469	90,721	1,088,296	5.93	1908
98,257	181,696	279,953	1.51	962,463	5.19	11,854	40,772	3,794	449	21,994	3,766	82,629	1,045,092	5.63	1909
92,544	187,941	280,485	1.50	913,983	4.90	8,523	27,269	6,169	733	7,783	1,342	51,819	965,802	5.17	1910
36,120	194,127	280,247	1.51	928,981	5.00	11,759	19,957	5,227	1,108	30,293	221	68,565	997,546	5.37	1911

1900, the amount, except in a few cases, was small, and is included under ordinary expenditure.
impossible to divide the Darenth Asylum expenditure on imbeciles from the Darenth Camps expenditure on smallpox

Acts, but such contributions are excluded for the years 1897-1903.
to the several Institutions to which the goods are supplied, and therefore forms part of the above expenditure under the recent years. [appropriate head.]

APPENDIX VIII.—Statement of the Total Days' Maintenance and the Daily
30 September

INSTITUTIONS.	TOTAL NUMBER OF DAYS'						
	1911	1910	1909	1908	1907	1906	1905
Asylums (Imbecile)—							
Leavesden	731,153	707,539	755,134	679,132	669,737	646,906	646,1
Caterham	742,960	712,325	708,860	681,473	696,203	685,937	702,1
Darenth	720,755	701,935	696,125	698,594	715,324	702,606	685,0
Tooting Bec	382,266	374,499	355,611	302,634	288,407	280,323	270,5
Rochester House .. .. .	..	..	..	..	..	..	28,3
Belmont .. .. .	..	..	..	90,757	110,348	90,472	18,1
Gore Farm .. .. .	..	..	..	..	..	..	62,1
Totals and Averages ..	2,577,134	2,496,298	2,515,730	2,452,590	2,480,019	2,406,244	2,412,5
Hospitals (Fever)—							
Eastern	80,571	49,508	92,820	98,789	114,746	105,372	101,3
North-Eastern	137,194	109,832	156,511	191,142	165,474	159,981	159,1
North-Western	99,941	92,854	115,520	127,006	130,735	118,188	104,4
Western	99,145	93,042	133,790	146,864	135,162	120,600	102,7
South-Western	87,638	85,073	90,162	87,164	87,368	99,588	100,8
Fountain	1,092	3,087	33,312	70,121	22,207	66,927	72,0
Grove	99,719	80,576	110,387	112,256	133,004	116,970	114,8
South-Eastern	104,579	91,085	106,126	114,619	130,164	20,790	..
Park .. .. .	..	52,399	125,343	151,720	142,044	104,168	126,4
Brook	103,066	96,208	142,895	146,419	147,350	142,669	141,3
Northern	126,480	130,719	168,379	208,850	211,627	190,804	189,8
Southern	101,241	129,130	217,029	285,809	254,524	226,676	22,3
Joyce Green .. .. .	..	..	..	27,340	..	..	..
London General Hospitals ..	(M.A.B. en	teric cases)	..	..	..	..	..
Totals and Averages ..	1,040,666	1,013,513	1,492,274	1,768,099	1,674,405	1,472,733	1,236,0
Hospitals (Smallpox)—							
Hospital Ships, Long Reach, and							
Joyce Green	2,281	574	140	54	73	949	3,0
Gore Farm .. .. .	..	..	..	..	..	..	..
Totals and Averages ..	2,281	574	140	54	73	949	3,0
Homes and Schools (Children)—							
High Wood	117,767	113,148	103,891	98,023	96,814	91,975	86,0
White Oak	124,040	123,485	104,641	96,657	101,349	88,058	95,0
The Downs	102,262	115,550	128,513	126,093	130,216	142,625	145,0
*Queen Mary's Hospital	268,317	296,347	124,134	..	..	..	..
Park Hospital	151,304	..	..	..	..	..	..
S. Anne's	47,691	47,664	46,808	46,442	28,721	43,807	45,0
East Cliff	45,170	45,227	43,984	42,688	44,344	41,632	45,0
Millfield	43,369	42,913	40,944	39,901	36,130	26,942	22,0
Bridge	69,642	60,937	50,285	40,013	25,451	23,298	56,0
Lloyd Street	9,237	8,287	8,004	8,208	8,856	9,114	8,0
Elm Grove	4,827	4,701	4,206	4,584	4,703	4,588	4,0
Kingwood Road .. .. .	..	..	..	1,622	6,856	7,385	7,0
Earlsfield Road	3,160	3,424	3,248	2,986	2,735	3,306	3,0
Surrey House	6,579	6,552	6,346	5,719	5,307	5,408	5,0
Fountain Hospital (Feeble minded Colony) ..	19,443	..	..	..	..	..	..
Pentonville Road	† { ..	2,397	11,706	9,678	8,490	9,421	8,0
Harrow Road	† { ..	967	4,460	3,805	3,867	3,443	3,0
Camberwell Green	† { ..	2,774	10,029	8,785	6,500	7,440	6,0
Total and Averages ..	1,012,808	874,373	691,199	535,204	510,339	508,442	543,0
Training Ship (Boys)	245,219	252,581	224,052	198,693	205,250	207,894	199,0
GRAND TOTALS	4,878,108	4,637,339	4,923,395	4,954,640	4,870,086	4,596,262	4,394,0

* NOTE. The average number of inmates (1909) for Queen Mary's Hospital h
† Homes transferred to the London County Council as from the 1 January, 191

Average Number of Inmates for each of the TEN years ended 1911.

MAINTENANCE.			AVERAGE NUMBER OF INMATES.									
1904	1903	1902	1911	1910	1909	1908	1907	1906	1905	1904	1903	1902
634,123	638,834	643,351	2,009	1,944	2,075	1,866	1,805	1,777	1,775	1,742	1,755	1,767
705,311	701,556	702,795	2,041	1,957	1,947	1,872	1,877	1,884	1,929	1,938	1,927	1,931
706,071	709,214	722,343	1,980	1,928	1,912	1,919	1,928	1,930	1,882	1,940	1,948	1,984
268,100	148,430	..	1,050	1,029	977	832	777	770	743	736	408	..
49,302	52,249	42,517	..	..	..	..	..	..	78	135	144	117
..	..	..	..	..	..	249	298	249	50	..	..	..
6,440	..	..	..	..	..	..	..	..	171	18	..	..
2,369,347	2,250,283	2,111,006	7,080	6,858	6,911	6,738	6,685	6,610	6,628	6,509	6,182	5,799
95,551	74,871	86,945	221	136	255	271	309	289	278	262	206	239
122,413	116,304	174,980	377	302	430	525	446	440	437	336	319	481
95,533	110,989	161,448	275	255	317	349	352	325	287	262	305	444
90,430	118,367	134,471	272	256	368	404	364	331	282	248	325	369
77,911	97,145	108,938	241	234	248	240	235	274	277	214	267	299
..	69,538	137,766	3	8	91	193	60	184	200	..	191	378
78,816	107,990	90,423	274	221	303	308	359	321	316	217	297	248
23,490	79,370	97,419	287	250	292	315	351	57	..	65	218	268
107,099	105,192	148,198	..	144	344	417	383	286	348	294	289	407
130,918	134,523	162,472	283	264	393	402	397	392	388	360	369	446
144,900	129,243	176,724	348	359	463	574	571	524	522	398	355	486
..	..	298	278	355	596	785	686	623	61	..	..	1
..	..	..	..	..	..	75	..	..	..	..	..	..
..	1,308	3,933	..	..	..	..	..	..	..	..	4	11
967,061	1,144,840	1,484,015	2,859	2,784	4,100	4,858	4,513	4,046	3,396	2,656	3,145	4,077
19,551	12,461	95,643	6	2	..	..	..	3	9	53	34	263
..	..	202,001	..	..	..	..	..	..	..	..	..	555
19,551	12,461	297,644	6	2	..	..	..	3	9	53	34	818
5,073	..	..	324	311	285	269	261	253	236	14	..	..
119,834	57,786	..	341	339	287	265	273	242	263	329	159	..
146,968	78,293	..	281	318	353	346	351	392	399	404	215	..
..	..	..	737	814	*502	..	..	..	..	..	..	..
..	..	..	416	..	..	..	..	..	..	..	..	..
40,429	41,513	42,222	131	131	129	128	77	120	125	111	114	116
35,867	32,875	29,468	124	124	121	117	120	114	124	99	90	81
6,518	..	..	119	118	113	110	97	74	63	18	..	..
55,764	57,085	55,481	191	167	138	110	69	64	155	153	157	152
8,556	8,052	8,839	25	23	22	23	24	25	22	23	22	24
4,256	4,628	4,576	13	13	12	13	13	13	12	12	13	13
7,297	6,667	7,245	..	..	..	4	18	20	20	20	18	20
2,789	336	..	9	9	9	8	7	9	9	8	1	..
4,020	..	..	18	18	17	16	14	15	15	11	..	..
..	..	..	53	..	..	..	..	..	..	..	..	..
8,914	9,304	5,594	† {	27	32	27	23	26	24	24	26	15
3,355	4,190	2,740		11	12	10	11	9	9	9	11	8
7,263	7,141	5,394		31	28	24	18	21	18	20	20	15
456,903	307,870	161,559	2,782	2,454	2,060	1,470	1,376	1,397	1,494	1,255	846	444
193,350	197,012	207,837	674	694	616	546	553	571	547	531	542	571
4,006,212	3,912,466	4,262,061	13,401	12,792	13,687	13,612	13,127	12,627	12,074	11,004	10,749	11,709

been calculated for the period from 29 January, 1909, only.

APPENDIX IX.—Statement of the average Weekly Cost of Inmate Office and Central Expenses) for each of the

INSTITUTIONS	WEEKLY AVERAGE.														
	MAINTENANCE (including provisions, necessities, clothing, and funerals).										OTHER				
	1911	1910	1909	1908	1907	1906	1905	1904	1903	1902	1911	1910	1909	1908	1907
	*	*	*	*							*	*	*	*	
Asylums															
(Imbecile)—	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.
Leavesden ..	3 5.0	3 4.6	3 5.4	3 8.6	3 3.6	3 6.6	3 8.3	3 9.7	3 11.9	4 3.4	6 7.8	6 7.6	6 0.6	6 6.0	6 6.0
Caterham ..	3 3.0	3 4.9	3 7.9	3 9.4	3 7.0	3 8.5	3 9.1	3 10.5	4 0.7	4 0.6	6 2.2	6 2.5	5 11.4	6 1.0	5 11.4
Darenth ..	3 3.8	3 3.2	3 4.0	3 4.7	2 10.0	2 11.2	3 1.7	3 10.3	3 11.1	3 11.7	6 3.4	6 4.0	6 5.4	6 5.4	6 5.4
Tooting Bec ..	3 0.1	3 1.2	3 2.7	3 9.1	3 6.3	3 5.8	3 7.3	3 11.1	..	..	10 9.9	11 1.0	11 8.5	12 10.5	13 10.5
Rochester H. ..	..	..	..	..	..	..	3 3.8	3 4.8	4 2.8	..	..	..	..	..	..
Belmont ..	..	..	..	3 8.2	3 7.1	4 11.8	..	..	..	..	..	..	..	..	11 11.8
Gore Farm ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total															
Average Cost	3 3.3	3 3.8	3 5.4	3 7.8	3 3.4	3 5.5	3 6.4	3 10.1	3 11.7	4 1.2	7 0.4	7 1.1	6 11.4	7 2.1	7 2.1
Hospitals															
(Fever)—															
Eastern ..	3 8.8	3 9.6	3 9.0	3 10.3	3 10.3	3 10.4	3 11.3	4 1.0	4 5.2	4 6.0	32 9.2	46 3.9	30 3.5	27 5.2	24 5.2
North-Eastern	4 3.0	4 8.3	4 7.1	4 3.7	4 3.0	3 8.7	3 10.2	4 2.5	4 9.2	4 6.7	30 2.8	37 10.3	29 1.0	24 2.1	25 2.1
North-Western	4 0.6	3 9.3	3 8.5	3 9.6	3 10.7	3 6.2	4 3.4	4 10.4	5 3.0	5 5.9	30 8.5	32 1.8	27 9.6	26 1.8	25 1.8
Western ..	4 2.0	4 9.2	4 1.6	4 2.0	3 11.6	4 2.0	4 8.9	5 2.8	5 2.9	5 10.9	32 6.9	35 5.4	28 7.4	25 10.1	27 10.1
South-Western	4 5.2	4 9.6	4 8.2	4 6.1	4 3.7	3 11.1	4 3.1	5 1.3	5 5.3	5 8.5	33 2.2	34 2.1	33 1.9	34 5.5	33 5.5
Fountain ..	5 3.1	4 11.3	4 10.9	4 8.3	4 4.8	4 4.0	5 0.7	..	..	5 2.0	..	..	..	33 11.5	..
Grove ..	4 1.0	4 1.8	4 8.0	4 4.4	4 0.8	4 4.6	4 6.6	5 2.5	6 0.2	6 4.7	36 3.9	42 5.8	34 3.6	35 9.9	30 9.9
South-Eastern	3 9.4	3 10.8	3 6.8	3 10.1	4 0.3	..	..	..	5 5.6	5 9.3	31 7.2	35 5.0	33 0.5	33 11.4	29 11.4
Park ..	..	4 9.0	4 6.6	4 5.0	4 5.7	4 7.7	4 10.0	6 0.0	6 3.6	5 10.3	..	..	30 11.3	27 0.7	27 0.7
Brook ..	4 0.8	4 6.9	4 6.2	4 5.7	4 5.8	4 1.7	4 4.5	4 9.0	5 8.2	5 10.9	36 6.7	38 1.8	29 8.8	29 7.6	29 7.6
Northern ..	4 3.1	4 6.2	5 0.3	5 0.1	5 3.4	4 8.8	4 10.3	5 3.1	5 10.1	6 1.1	23 9.3	23 7.9	20 4.5	17 3.1	16 3.1
Southern ..	4 2.7	4 1.1	4 2.3	4 6.7	4 2.8	4 0.8	..	..	..	..	27 7.0	24 9.0	16 2.7	15 3.1	14 3.1
Joyce Green ..	..	..	..	8 3.1	..	..	..	..	..	..	..	..	..	..	..
London Gen. Hospitals	(M.A. B. ent	eric cas	es)	..	..	..	..	5 8.0	5 6.6	..	..	..	..	..	..
Total															
Average Cost	4 1.4	4 4.0	4 4.3	4 5.3	4 3.8	4 1.7	4 5.6	4 11.5	5 5.7	5 6.9	31 3.0	33 8.0	27 8.6	25 3.7	24 3.7
Hospitals															
(Smallpox)—															
Hos. Ships, Long Reach,															
Joyce Green	10 5.2	7 9.6	9 0.0	..	..	7 9.8	9 3.8	10 1.3	7 11.7	11 7.6	..	..	..	..	..
Gore Farm ..	..	..	..	..	..	..	..	..	..	11 8.9	..	..	..	..	..
Total															
Average Cost	10 5.2	7 9.6	9 0.0	..	..	7 9.8	9 3.8	10 1.3	7 11.7	11 8.4	..	..	..	..	..
Homes, &c.															
(Children)—															
High Wood ..	3 5.0	3 3.8	3 6.5	3 10.3	3 11.3	3 10.7	4 3.0	..	..	..	10 8.7	10 11.7	11 10.4	12 9.9	12 9.9
White Oak ..	3 3.2	3 2.9	3 5.7	3 9.5	3 6.4	3 10.7	3 7.7	3 8.0	..	..	11 0.6	11 4.6	12 11.6	13 11.7	12 11.7
The Downs ..	3 1.5	3 1.3	3 3.3	3 5.6	3 2.4	3 4.6	3 5.5	3 11.4	..	..	12 4.1	11 7.6	10 8.4	10 1.3	10 1.3
Queen Mary's H. ..	3 4.5	3 3.3	4 2.3	† ..	..	..	..	..	..	..	14 10.5	13 5.1	14 2.2	† ..	..
Park Hospital	5 0.4	..	..	..	..	..	..	..	..	..	23 1.0	..	..	..	..
S. Anne's ..	3 0.4	3 2.5	3 5.1	3 5.3	3 5.1	3 2.3	3 8.4	4 0.3	3 10.4	4 0.8	8 1.0	8 7.6	8 11.1	8 7.4	8 7.4
East Cliff ..	3 4.1	3 4.8	3 6.1	3 7.0	3 3.5	3 4.6	3 6.2	3 8.0	3 11.8	4 6.8	9 9.5	9 9.6	10 3.1	9 6.5	9 6.5
Millfield ..	4 3.0	4 1.0	4 1.4	4 7.3	5 10.2	5 11.4	6 4.6	..	..	..	8 8.8	8 9.6	8 7.2	9 3.4	10 3.4
Bridge ..	3 10.4	4 2.0	4 10.5	5 0.8	3 10.1	..	2 11.5	3 2.0	3 2.3	3 7.8	5 6.8	5 8.4	7 4.5	7 11.9	6 11.9
Lloyd Street ..	3 11.6	3 8.4	3 10.8	4 4.8	4 7.9	4 3.8	4 7.0	5 0.5	4 8.9	5 5.2	7 8.6	8 7.6	8 9.8	8 9.2	8 9.2
Elm Grove ..	2 11.1	2 6.7	3 1.5	3 2.2	3 1.1	3 5.7	3 5.9	3 10.2	3 9.0	4 2.0	8 9.8	9 8.9	9 6.7	8 8.3	8 8.3
Kingwood Rd. ..	..	..	..	3 8.5	4 2.5	4 3.4	4 7.1	4 8.6	5 8.3	5 5.6	..	..	..	..	8 5.6
Earlsfield Road	3 9.7	4 7.0	4 4.8	4 3.2	3 11.3	4 4.3	4 6.9	6 5.1	..	..	9 8.4	8 7.0	8 3.2	9 0.0	10 0.0
Surrey House	3 4.8	3 9.9	3 6.6	4 5.5	3 10.8	5 7.4	6 7.2	..	..	..	6 10.2	6 7.0	6 4.3	8 4.1	8 4.1
Fountain H. ..	3 7.5	..	..	..	..	..	..	..	..	..	12 9.1	..	..	..	..
† Pen'ville Rd. ..	..	2 11.7	2 11.0	2 11.8	3 2.8	3 2.0	3 3.9	4 7.6	4 0.2	..	..	11 8.2	8 8.8	10 4.6	10 4.6
† Harrow Rd. ..	..	3 3.9	3 6.6	3 1.9	3 7.9	3 7.4	3 8.2	4 5.0	4 1.7	..	..	20 1.5	13 11.2	16 9.0	16 9.0
† Camb'well G. ..	..	2 0.2	2 7.0	3 0.1	2 11.7	2 6.2	2 9.4	4 1.3	3 10.3	..	..	9 10.7	9 11.3	10 7.6	12 7.6
Total															
Average Cost	3 7.8	3 4.4	3 8.3	3 9.8	3 8.6	3 9.0	3 9.3	3 9.9	3 9.5	4 2.0	13 2.9	11 2.7	11 1.8	10 11.0	11 11.0
Training Ship															
(Boys)—	3 11.3	3 11.6	4 2.8	4 9.1	4 7.4	4 3.9	4 8.1	5 2.0	5 4.0	5 1.4	6 5.6	5 10.9	6 5.2	7 3.6	7 3.6

* NOTE.—The Industrial Farm, &c., balances are adjusted wholly on other Charges in 1908—1911, thus modifying the figures.
† The Queen Mary's Hospital figures—30 September, 1909, are for half-year only, and are included in the average total.

FINANCE COMMITTEE.

(excluding Rent or Loan Charges, Special Expenditure and Head
TEN years ended 30 September, 1911.

COST PER INMATE.

CHARGES.					TOTAL.									
1906	1905	1904	1903	1902	1911	1910	1909	1908	1907	1906	1905	1904	1903	1902
s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.	s. d.
3 7.4	6 2.8	6 0.3	6 1.6	6 5.3	10 0.8	10 0.2	9 6.0	10 2.6	9 9.8	10 2.0	9 11.1	9 10.0	10 1.5	10 8.7
5 10.2	5 7.3	5 6.6	5 5.6	5 5.5	9 5.2	9 7.4	9 7.3	9 10.4	9 6.0	9 6.7	9 4.4	9 5.1	9 6.2	9 6.1
7 4.9	7 5.1	8 0.0	8 1.8	8 3.1	9 7.2	9 7.2	9 9.4	9 10.1	9 7.5	10 4.1	10 6.8	11 10.3	12 0.9	12 2.8
3 8.8	14 1.4	13 3.8	..	..	13 10.0	14 2.2	14 11.2	16 7.6	16 11.8	17 2.6	17 8.7	17 2.9	..	..
..	..	7 9.4	8 3.0	9 7.8	..	..	..	..	..	..	..	11 1.2	11 7.8	13 10.6
3 1.4	..	..	..	..	..	..	..	..	15 0.6	18 1.2	..	..	..	..
..
7 8.5	7 3.9	7 4.1	6 7.7	6 9.6	10 3.7	10 4.9	10 4.8	10 9.9	10 8.9	11 2.0	10 10.3	11 2.2	10 7.4	10 10.8
3 11.0	29 2.3	30 7.0	38 6.8	34 6.4	36 6.0	50 1.5	34 0.5	31 3.5	28 0.4	30 9.4	33 1.6	34 8.0	43 0.0	39 0.4
4 5.7	24 5.8	29 5.5	33 0.7	22 5.0	34 5.8	42 6.6	33 8.1	28 5.8	29 4.9	28 2.4	28 4.0	33 8.0	37 9.9	26 11.7
3 10.8	30 1.4	30 4.6	28 6.8	21 6.2	34 9.1	35 11.1	31 6.1	29 11.4	29 1.0	30 5.0	34 4.8	35 3.0	33 9.8	27 0.1
9 4.8	34 3.5	38 1.5	31 3.3	28 0.9	36 8.9	40 2.6	32 9.0	30 0.1	31 5.7	34 6.8	39 0.4	43 4.3	36 6.2	33 11.8
9 9.4	29 4.0	38 0.6	32 6.2	29 9.5	37 7.4	38 11.7	37 10.1	38 11.6	38 2.9	33 8.5	33 7.1	43 1.9	37 11.5	35 6.0
6 0.5	31 11.0	..	..	20 4.2	..	..	..	38 7.8	..	40 4.5	36 11.7	..	..	25 6.2
3 8.1	33 9.2	44 6.8	37 3.7	46 4.2	40 4.9	46 7.6	38 11.6	40 2.3	34 7.2	38 0.7	38 3.8	49 9.3	43 3.9	52 8.9
..	..	..	39 8.6	33 3.9	35 4.6	39 3.8	36 7.3	37 9.5	33 3.0	..	..	..	45 2.2	39 1.2
3 11.4	28 7.0	34 2.2	35 4.6	26 9.4	..	..	35 5.9	31 5.7	32 4.4	38 7.1	33 5.0	40 2.2	41 8.2	32 7.7
9 5.1	31 3.2	33 11.5	35 11.7	31 1.8	40 7.5	42 8.7	34 3.0	34 1.3	34 2.9	34 6.8	35 7.7	38 8.5	41 7.9	37 0.7
3 5.8	18 4.8	21 8.6	27 3.9	20 2.0	28 0.4	28 2.1	25 4.8	22 3.2	21 11.3	23 2.6	23 3.1	26 11.7	33 2.0	26 3.1
7.1	..	..	..	..	31 9.7	28 10.1	20 5.0	19 9.8	18 7.1	18 7.9	..	..	..	..
..
..	..	..	17 1.5	29 9.5	..	..	..	..	..	..	..	..	22 9.5	35 4.1
11.0	28 2.2	33 0.5	33 6.4	27 2.5	35 4.4	38 0.0	32 0.9	29 9.0	28 8.5	30 0.7	32 7.8	38 0.0	39 0.1	32 9.4
..	..	..	..	55 0.0	..	..	..	..	..	..	..	..	..	66 7.6
..	..	..	..	26 0.0	..	..	..	..	..	..	..	..	..	37 8.9
..	..	..	..	36 0.0	..	..	..	..	..	..	..	..	..	47 8.4
11.9	13 2.1	..	..	..	14 1.7	14 3.5	15 4.9	16 8.2	16 4.4	16 10.6	17 5.1	..	..	..
0.0	13 6.0	11 5.4	..	..	14 3.8	14 7.5	16 5.3	17 9.2	16 5.0	17 10.7	17 1.7	15 1.4	..	..
9.3	9 1.3	9 7.5	..	..	15 5.6	14 8.9	13 11.7	13 6.9	13 5.1	13 1.9	12 6.8	13 6.9	..	..
..	..	..	..	..	18 3.0	16 8.4	18 4.5	† ..	..	..	..	..	..	..
..	..	..	..	..	28 1.4	..	..	..	..	..	..	..	..	..
2.2	9 5.2	10 2.7	6 7.2	10 0.5	11 1.4	11 10.1	12 4.2	12 0.7	..	12 4.5	13 1.6	14 3.0	10 5.6	14 1.3
2.7	8 5.2	9 6.4	9 10.5	10 4.9	13 1.6	13 2.4	13 9.2	13 1.5	12 7.7	12 7.3	11 11.4	13 2.4	13 10.3	14 11.7
10.1	13 8.0	..	..	..	12 11.8	12 10.6	12 8.6	13 10.7	16 9.3	18 9.5	20 0.6	..	..	..
..	8 11.5	9 3.9	8 11.9	9 1.4	9 5.2	9 10.4	12 3.0	13 0.7	10 9.8	..	11 11.0	12 5.9	12 2.2	12 9.2
11.1	9 10.1	9 10.4	10 7.3	9 11.0	11 8.2	12 4.0	12 8.6	13 2.0	12 11.7	13 2.9	14 5.1	14 10.9	15 4.2	15 4.2
10.6	9 9.5	9 8.0	9 4.5	9 11.3	11 8.9	12 3.6	12 8.2	11 10.5	11 7.3	12 4.3	13 3.4	13 6.2	13 1.5	14 1.3
5.9	7 11.0	8 3.5	8 10.1	8 2.6	..	..	..	..	12 4.0	11 9.3	12 6.1	13 0.1	14 6.4	13 8.2
2.1	8 11.8	10 7.1	..	..	13 6.1	13 2.0	12 8.0	13 3.2	14 2.7	12 6.4	13 6.7	17 0.2	..	..
6.5	7 8.7	..	..	..	10 3.0	10 4.9	9 10.9	12 9.6	12 5.7	14 1.9	14 3.9	..	..	..
..	..	..	..	..	16 4.6	..	..	..	..	..	..	..	..	..
9.6	11 6.0	11 6.0	11 5.2	..	..	14 7.9	11 7.8	13 4.4	14 0.2	13 11.6	14 9.9	16 1.6	15 5.4	..
9.7	18 3.2	17 4.3	15 1.2	..	..	23 5.4	17 5.8	19 10.9	18 9.9	21 5.1	21 11.4	21 9.3	19 2.9	..
3.5	13 0.9	11 1.9	12 2.6	..	..	11 10.9	12 6.3	13 7.7	15 9.2	13 9.7	15 10.3	15 3.2	16 0.9	..
2.8	10 9.6	10 2.9	9 0.9	9 8.0	16 10.7	14 7.1	14 10.1	14 8.8	14 8.7	14 11.8	14 6.9	14 0.8	12 10.4	13 10.0
11.4	7 3.8	7 0.4	7 2.7	6 9.6	10 4.9	9 10.5	10 8.0	12 0.7	12 1.0	11 3.3	11 11.9	12 2.4	12 6.7	11 11.0

Comparison with former years, more particularly the Maintenance Charges at Darenth Asylum and Bridge Industrial Home.
† Homes transferred to the London County Council as from 1 January, 1910.

APPENDIX X.—Statement showing the Rateable Value of the District, produce of 1d. rate in the £, rates in the £, and amounts of Precepts—each year from 1867 to 1911.

No. of Year.	Year ended 30 September.	RATEABLE VALUE of the Asylum District at 30 September of each year		PRODUCE of 1d. rate in the £ on the rateable value at 30 Sept. of each year.	PRECEPTS.						Year ended 30 September.	No. of Year.
		Amount.	Annual Increase.		Amount in the £ worked out as a Metropolitan Rate. *			Amount Raised.				
					Com-mon Charges.	Direct Charges	Total.	Common Charges.	Direct Charges.	Total.		
		£	£	£	d.	d.	d.	£	£	£		
1	1867	16,024,891	..	66,770	..	..	..	..	..	..	1867	
2	1868	16,852,680	827,789	70,219	0.12	..	0.12	8,346	..	8,346	1868	
3	1869	17,564,237	711,557	73,184	0.12	..	0.12	8,777	..	8,777	1869	
4	1870	17,802,258	238,021	74,176	0.50	..	0.50	40,317	636	40,953	1870	
5	1871	19,812,058	2,009,800	82,550	0.75	0.35	1.10	99,199	31,400	130,599	1871	
6	1872	19,812,058	..	82,550	0.75	1.30	2.05	61,912	111,290	173,202	1872	
7	1873	19,812,058	..	82,550	1.00	0.50	1.50	83,768	42,590	126,358	1873	
8	1874	20,391,125	579,067	84,963	1.00	0.70	1.70	84,964	60,820	145,784	1874	
9	1875	20,713,749	322,624	86,307	1.00	0.70	1.70	86,356	61,040	147,396	1875	
10	1876	23,035,324	2,321,575	95,980	1.50	0.55	2.05	138,209	51,980	190,189	1876	1
11	1877	23,367,824	332,500	97,365	1.50	0.80	2.30	145,380	79,180	224,560	1877	1
12	1878	23,367,824	..	97,365	1.75	0.85	2.60	170,390	81,970	252,360	1878	1
13	1879	23,848,222	480,398	99,367	1.75	0.88	2.63	173,893	88,080	261,973	1879	1
14	1880	24,388,802	540,580	101,620	1.75	0.66	2.41	177,835	67,500	245,335	1880	1
15	1881	25,012,087	623,285	104,217	1.75	0.77	2.52	182,380	81,400	263,780	1881	1
16	1882	27,313,146	2,301,059	113,804	3.00	1.10	4.10	341,414	124,700	466,114	1882	1
17	1883	27,771,967	458,821	115,716	2.75	1.20	3.95	318,678	118,500	437,178	1883	1
18	1884	28,284,594	512,627	117,852	2.75	1.10	3.85	324,301	130,000	454,301	1884	1
19	1885	28,819,345	534,751	120,080	3.75	1.33	5.08	450,302	157,700	608,002	1885	1
20	1886	29,289,747	470,402	122,040	3.00	0.50	3.50	366,122	61,600	427,722	1886	2
21	1887	30,305,986	1,016,239	126,274	1.25	0.57	1.82	158,026	72,720	230,746	1887	2
22	1888	30,618,304	312,318	127,576	2.25	0.83	3.08	287,142	104,520	391,662	1888	2
23	1889	30,898,854	280,550	128,745	2.00	0.60	2.60	257,496	77,500	334,996	1889	2
24	1890	31,362,718	463,864	130,677	2.12	0.60	2.72	277,045	74,000	351,045	1890	2
25	1891	31,362,718	..	130,677	2.12	0.71	2.83	277,699	99,600	377,299	1891	2
26	1892	32,863,615	1,500,897	136,931	2.25	0.66	2.91	308,073	98,150	406,223	1892	2
27	1893	33,405,572	541,957	139,190	3.62	0.86	4.48	396,134	122,400	518,534	1893	2
28	1894	33,680,160	274,588	140,334	4.00	0.86	4.86	559,077	129,850	688,927	1894	2
29	1895	33,994,317	314,157	141,642	3.00	0.86	3.86	421,065	122,630	543,695	1895	2
30	1896	35,608,442	1,614,125	148,368	3.25	0.83	4.08	460,340	114,800	575,140	1896	3
31	1897	35,886,590	278,148	149,527	3.75	0.83	4.58	556,303	131,000	687,303	1897	3
32	1898	36,361,174	474,584	151,505	4.25	0.80	5.05	635,394	125,350	760,744	1898	3
33	1899	36,795,824	434,650	153,316	4.25	0.80	5.05	643,826	120,000	763,826	1899	3
34	1900	37,333,656	537,832	155,556	4.50	0.83	5.33	689,922	129,000	818,922	1900	3
35	1901	39,678,072	2,344,416	165,325	4.62	0.83	5.45	719,466	133,000	852,466	1901	3
36	1902	40,005,723	327,651	166,690	5.25	1.00	6.25	868,052	170,300	1,038,352	1902	3
37	1903	40,528,588	522,865	168,869	5.75	1.00	6.75	959,135	156,800	1,115,935	1903	3
38	1904	40,998,185	469,597	170,875	5.12	0.77	5.89	865,385	131,400	996,785	1904	3
39	1905	41,566,771	568,586	173,195	4.75	0.74	5.49	811,407	126,900	938,307	1905	3
40	1906	43,376,568	1,809,797	180,736	5.39	0.74	6.13	934,221	127,700	1,061,921	1906	4
41	1907	43,775,074	398,506	182,396	4.75	0.71	5.46	858,534	128,500	987,034	1907	4
42	1908	44,201,386	426,312	184,172	5.25	0.72	5.97	957,717	132,550	1,090,267	1908	4
43	1909	44,517,260	315,874	185,488	5.25	0.72	5.97	967,201	133,000	1,100,201	1909	4
44	1910	44,782,371	265,111	186,593	4.87	0.70	5.57	904,805	129,400	1,034,205	1910	4
45	1911	44,565,025	†217,346	185,687	4.50	0.65	5.15	839,570	121,000	960,570	1911	4

* The rates in the £ of the precepts raised are calculated on the basis of the rateable values in force at the time the half yearly estimates of expenditure were approved and adopted, viz., about March and July respectively of each year.

† Decrease in 1911.

APPENDIX XI.—Summary of sanctions to Borrow, amount
Borrowed and amount Outstanding 30 September, 1911.

INSTITUTION.							Amount Sanctioned.	Amount Borrowed.	Balance of Principal Outstanding 30 September, 1911.		
							£	£	£	s.	d.
Asylums—											
Leavesden .. .. .	..	..	..	..	..	..	223,916	223,916	75,711	0	11
Caterham .. .. .	..	..	..	..	..	..	227,254	227,254	71,611	15	5
Darenth .. .. .	..	..	..	..	..	..	334,058	334,058	74,191	12	4
Tooting Bec .. .. .	..	..	..	..	..	..	324,813	324,813	200,253	7	5
Clapton .. .. .	..	..	..	..	..	..	2,500	2,500	—		
Belmont .. .. .	..	..	..	..	..	..	127,955	127,955	79,653	17	5
TOTALS FOR ASYLUMS .. .. .	..	..	..	..	..	..	1,240,496	1,240,496	501,421	13	6
Hospitals—											
Eastern .. .. .	..	..	..	..	..	..	122,897	122,897	42,315	1	7
North-Eastern .. .. .	..	..	..	..	..	..	175,147	175,147	92,515	8	3
North-Western .. .. .	..	..	..	..	..	..	168,761	168,761	63,285	3	6
Western .. .. .	..	..	..	..	..	..	225,150	225,150	83,815	9	5
South-Western .. .. .	..	..	..	..	..	..	163,439	163,439	53,475	7	1
Fountain .. .. .	..	..	..	..	..	..	155,103	155,103	9,416	15	9
Grove .. .. .	..	..	..	..	..	..	271,106	271,106	126,181	19	10
South-Eastern .. .. .	..	..	..	..	..	..	262,506	262,506	131,651	6	4
Brook .. .. .	..	..	..	..	..	..	317,551	317,551	143,513	2	7
Northern .. .. .	..	..	..	..	..	..	194,428	194,428	52,841	17	2
Southern (Upper) .. .. .	..	..	..	..	..	..	180,488	180,488	51,584	11	9
Do. (Lower) .. .. .	..	..	..	..	..	..	135,000	135,000	42,807	3	7
Smallpox—Hospital Ships .. .. .	..	..	..	..	..	..	74,285	74,285	3,641	8	7
Do. Long Reach (Temporary) .. .. .	..	..	..	..	..	..	67,988	67,988	29,056	8	11
Do. Orchard .. .. .	..	..	..	..	..	..	123,000	123,000	48,707	10	4
Do. Joyce Green .. .. .	..	..	..	..	..	..	370,869	370,869	229,894	19	9
TOTALS FOR HOSPITALS .. .. .	..	..	..	..	..	..	3,007,718	3,007,718	1,204,703	14	5
Bacteriological Laboratories and Stables .. .. .	..	..	..	..	..	..	5,280	5,280	3,972	12	6
Land Ambulance Stations—											
Eastern .. .. .	..	..	..	..	..	..	2,645	2,645	1,326	14	4
North-Western .. .. .	..	..	..	..	..	..	20,254	20,254	10,159	5	11
Western .. .. .	..	..	..	..	..	..	3,800	3,800	752	8	0
South-Western .. .. .	..	..	..	..	..	..	15,976	15,976	8,614	18	11
South-Eastern .. .. .	..	..	..	..	..	..	1,625	1,625	1,022	16	9
Brook .. .. .	..	..	..	..	..	..	16,408	16,408	7,796	15	2
Mead .. .. .	..	..	..	..	..	..	28,500	28,500	11,285	17	10
Tooting Bec .. .. .	..	..	..	..	..	..	1,567	1,567	1,116	18	11
TOTALS FOR LAND AMBULANCE SERVICE .. .. .	..	..	..	..	..	..	90,775	90,775	42,075	15	10
River Ambulance Service—											
South Wharf .. .. .	..	..	..	..	..	..	43,154	43,154	18,000	9	2
North Wharf .. .. .	..	..	..	..	..	..	9,555	9,555	2,763	18	7
West Wharf .. .. .	..	..	..	..	..	..	14,207	14,207	4,344	0	0
Steamers .. .. .	..	..	..	..	..	..	35,837	35,837	4,122	8	5
TOTALS FOR RIVER AMBULANCE SERVICE .. .. .	..	..	..	..	..	..	102,753	102,753	29,230	16	2
Training Ship Exmouth .. .. .	..	..	..	..	..	..	98,376	98,376	50,738	11	9
Children's Homes and Schools—											
High Wood .. .. .	..	..	..	..	..	..	106,477	106,477	67,325	10	1
White Oak .. .. .	..	..	..	..	..	..	132,244	132,244	81,436	4	2
The Downs .. .. .	..	..	..	..	..	..	99,800	99,800	62,915	17	2
Queen Mary's Hospital .. .. .	..	..	..	..	..	..	245,195	245,195	170,777	18	0
Park Hospital for Children .. .. .	..	..	..	..	..	..	273,947	273,947	123,674	16	7
S. Anne's .. .. .	..	..	..	..	..	..	16,000	16,000	7,603	2	6
East Cliff .. .. .	..	..	..	..	..	..	17,320	17,320	10,316	9	11
Millfield .. .. .	..	..	..	..	..	..	27,042	27,042	16,976	19	7
Bridge .. .. .	..	..	..	..	..	..	11,000	11,000	6,272	11	7
Lloyd Street .. .. .	..	..	..	..	..	..	650	650	200	16	5
Elm Grove .. .. .	..	..	..	..	..	..	1,000	1,000	—		
Kingwood Road .. .. .	..	..	..	..	..	..	1,480	1,480	457	5	10
Earlsfield Road .. .. .	..	..	..	..	..	..	690	690	475	3	11
Surrey House .. .. .	..	..	..	..	..	..	1,050	1,050	692	19	10
Pentonville Road .. .. .	..	..	..	..	..	..	3,534	3,534	—		
Harrow Road .. .. .	..	..	..	..	..	..	3,715	3,715	—		
Camberwell Green .. .. .	..	..	..	..	..	..	5,196	5,196	—		
TOTALS FOR CHILDREN'S HOMES AND SCHOOLS .. .. .	..	..	..	..	..	..	946,340	946,340	549,125	15	7
Office of the Board .. .. .	..	..	..	..	..	..	110,811	110,811	67,066	3	4
Central Stores (Land and houses at Peckham) .. .. .	..	..	..	..	..	..	4,250	4,250	3,029	1	9
GRAND TOTALS .. .. .	..	..	..	..	..	£	5,606,799	5,606,799	2,451,364	4	10

See next page for notes.

APPENDIX XI.—continued.

(Note I.) Particulars of the dates of the several sanctions in force, the respective purposes, amounts and periods sanctioned; the amounts borrowed, year of borrowing and the rates per cent. of interest payable; together with the balances of principal outstanding as on 5 October, 1907, are set out in full detail in Appendix XI. of the Annual Report of the Finance Committee for 1907 (pages 116-124). During the year ended Michaelmas, 1908, sanction to borrow £13,025 was received from the Local Government Board for erection of boiler house, coal stores, and workshops at the North-Eastern Hospital, repayable within a period not exceeding fifteen years.

(Note II.) With the sanction of the Local Government Board the periods of such of the balances of the loans owing to the London County Council as Mortgagees in March, 1908, as fell due for repayment before March, 1922, were extended to such latter date and all such loans were thereupon consolidated into one loan repayable in fourteen years from 28 February, 1908, by equal half-yearly instalments of principal and interest combined amounting to £265,260 per annum, the interest being the average rate on the then existing loans, £3 7s. 1d. per cent. per annum, calculated with quarterly rests. On the transfer of the Remand Homes to the London County Council as at March, 1910, the annual total of principal and interest repayable was reduced to £264,775.

(Note III.) By arrangement with the other Mortgagees, the Public Works Loans Commissioners, the balances of loans outstanding are being repaid by equal half-yearly instalments of principal and interest combined, amounting to £16,000 per annum, the interest being calculated at the various rates provided in the mortgage deeds and the repayments ceasing on extinction of the loans within the sanctioned periods before March, 1922.

(Note IV.) On the 14 May, 1907, and 2 November, 1909, the Local Government Board, by order, cancelled all unexercised powers to borrow which for various reasons were then no longer likely to be required, and there are no unexercised powers to borrow now existing.

APPENDIX XII.—Interest on Loans.

The average rate of interest per cent. per annum payable on the principal of loans outstanding 30 September, 1911, amounting to £2,451,364, is **£3½**. The following table shows particulars of the amount borrowed, the amount discharged, and the amount outstanding, at the various rates now payable.

	Amount Borrowed. £	Amount Repaid. £	Amount Outstanding. £	Rate per cent. per annum of interest. £ s. d.
Public Works	263,363	137,419	125,944	2 15 0
Loans	4,480	4,480	—	3 0 0
	5,050	5,050	—	3 5 0
London County Council Loans	5,333,906	3,008,486	2,325,420	3 7 1
TOTALS	<u>£5,606,799</u>	<u>£3,155,435</u>	<u>£2,451,364</u>	<div><div>Average rate on outstanding loans.</div><div><u>£3 6 8</u> (approx.)</div></div>

APPENDIX XIII.— Statement showing the Accounts of the Bacteriological Laboratories and Central Stores for the years ended 30 Sep ember, 1911 and 1910.

Dr.		Bacteriological Laboratories.				Cr.	
1910.						1910.	
Labora- tories.	Stables.	Labora- tories.	Stables.				
£	£	£	£		£	£	£
1,040	—	To salaries of adviser, bac- teriologist and assistant	1,013	By amount charged to institutions at end of each half-year for bacterio- logical examination of diphtheria, etc., cases and samples of water	913		2,573
723	442	„ wages	705	„ amount charged to institutions at end of each half-year for antitoxin supplied	2,540		1,569
		„ horses and other animals, including veterinary surgeon's fees and charges (less sale of horses)	52			3,453	4,142
93	141	„ fodder, litter, etc., for live stock	65	„ antitoxin supplied to London General Hospitals	23		18
41	425	„ sundry expenses	60	„ sale of empties and manure	18		13
63	37	„ chemicals, apparatus, etc.	303				
406	15	„ rents	153				
153	130	„ rates	41				
38	32	„ repairs to buildings and furniture	30				
63	111	„ books, stationery and postage	25				
38	—	„ gas, electricity and water	123				
55	98	„ travelling expenses and carriage	32				
28	1						
£2,741	1,432	£2,602	892				
	2,741		2,602				
	£4,173		£3,494			£3,494	£4,173

Dr.		Central Stores.				Cr.	
1910.						1910.	
£		£		£		£	
16,654	To value of stock in hand, September, 1910 (at current prices)	27,331	By balance from last year	681		1,607	
54,396	„ cost of goods purchased during the year	55,316	„ amount charged to institutions for goods supplied during the year (at current prices)	48,027		42,784	
681	„ balance carried to next year's account	2,153	„ sale of obsolete goods by auction (net)	110		—	
			„ sale of crates	—		9	
			„ value of stock in hand 30 Sept., 1911 (at current prices)	35,982		27,331	
£71,731		£84,800		£84,800		£71,731	
277	To salary of clerk in charge	297	By expenses charged to institutions in proportion to the value of the goods supplied during the year	3,830		3,777	
1,486	„ wages of staff (including proportion for head office book-keeping staff)	1,571					
5	„ uniforms for staff	4					
371	„ carriage of goods to institutions	416					
298	„ repairs to property, furniture, etc.	217					
128	„ heating, lighting and cleansing	140					
807	„ rents of premises	808					
280	„ rates	294					
121	„ printing, stationery, postage, etc.	79					
4	„ travelling expenses of managers and staff	4					
£3,777		£3,830		£3,830		£3,777	

The above expenditure is charged to and forms part of the expenditure of the several establishments to which the goods are supplied, see Appendix III.

ANNUAL REPORT OF THE WORKS COMMITTEE FOR 1911.

Chairman and Vice-Chairman.

Mr. W. H. Ecroyd having in May last completed a term of three years' office as Chairman, we elected Mr. F. J. Oldman, our Vice-chairman, to the vacant chairmanship, and appointed Mr. J. T. Helby as our Vice-chairman.

Engineer-in-chief's Department.**(i.) Alterations and additions at Belmont Workhouse.**

In our report to the Board on 11th February last, upon a letter from the Local Government Board with which they forwarded for the Manager's observations, copy of a communication addressed to them by the Fulham Board of Guardians with regard to the proposed provision of additional sanitary and other accommodation and the extension of the laundry at this workhouse, we pointed out that, whilst the Managers were under no legal liability or obligation of any kind to pay for the additional accommodation proposed, or any portion thereof, neither had they any responsibility in the matter, we saw no objection to the Managers carrying out the alterations desired and paying for them, provided some means could be devised for preventing the expenditure falling unfairly on different parts of the Metropolis. A communication based upon our report was duly forwarded to the Local Government Board, who, in their reply stated that, having regard to all the circumstances of the case, they would be glad if the Managers would themselves carry out the proposed alterations and pay for them, without charging the Fulham Guardians any additional rent.

Plans for these alterations were accordingly prepared; a tender for the execution of the necessary works was accepted by the Managers on 9th September last, and the works, the total cost of which was estimated at £2,855, were approaching completion at the end of the year.

(ii.) Works carried out during 1911.

The total approximate value of the works carried out under the Engineer-in-chief during 1911, was £74,757, of which £36,229 represents the value of building works and repairs, and £38,528 that of engineering works and repairs. Of the former works, £31,506 represents the cost of those carried out by contract, and £4,723 the cost of those executed by direct labour. Engineering works to the value of £17,734 were carried out by contract, and to the value of £2,794 by direct labour, the balance (£18,000) representing roughly the value of works carried out by the staffs at the various institutions under the supervision of the Engineer-in-chief.

(iii.) Annual cleaning and painting works and repairs. The estimated value and actual cost on completion of the cleaning and painting works carried out at the Board's infectious hospitals are shown in the following statement, the works in every case having been carried out by contract, viz. :—

			Estimate.	Cost.
			£	£
Eastern Hospital	...	...	1,725	1,724
North-Eastern Hospital	...	...	197	198
North-Western	„	...	675	696
Western	„	...	2,773	2,854
South-Western	„	...	975	975
Grove	„	...	297	294
South-Eastern	„	...	359	358
Brook	„	...	1,208	1,197
Northern	„	...	338	338
Southern	„	...	1,423	1,416
Park	„	...	1,460	1,460
Queen Mary's	„	...	93	89
Smallpox Hospitals	...	...	1,087	1,136
Totals	...		<u>£12,610</u>	<u>£12,735</u>

At the Leavesden, Caterham and Tooting-Bec Asylums cleaning and painting works, amounting in value to £1,583 13s. 7d., were carried out by direct labour under the supervision of the Engineer-in-chief, who also supervised the following works which were carried out by contract at institutions under the control of the Children's Committee, viz. :—

			Estimate.	Cost.
			£	£
High Wood School	...	...	655	489
White Oak	„	...	1,395	1,340
Millfield	...	...	225	233

The only case in which we found it necessary to carry out works by direct labour in consequence of the lowest tender received being considerably in excess of the Engineer-in-chief's estimate was that of repairs to roofs and gutters at the Fountain Hospital.

(iv.) Metallic filament lamps. In our last annual report we adverted to the satisfactory results which had attended the installation of low voltage metallic filament lamps (in place of carbon filament lamps) as authorised by the Managers in July, 1909, and promised to report as to the actual financial and other advantages which had resulted from the change. We now submit (*vide* Appendix) a statement showing the economies effected by the introduction of metallic filament lamps, and reference to this statement will show that in all institutions where similar conditions existed during 1910 and 1911, a considerable saving in expenditure is shown when these years are compared with 1908, which was the last year when carbon filament lamps were in use. The net reduction in the expenditure was £3,044 16s. 3d. during 1910, as compared with that of 1908; and although the expenditure during 1911 showed a net increase of £194 19s. 8d. as compared with 1910 (due mainly to the greater number of days maintenance during 1911) the expenditure during 1911 as compared with 1908 showed the substantial reduction of £2,991 18s. 3d.

(v.) Requirements of Factory Acts. The approximate cost of guarding machinery in the Board's laundries and workshops to meet the requirements of these acts during 1911 was £378, as against £600 in 1910.

- (vi.) Head office staff. During 1911 the total numerical strength of the Engineer-in-chief's staff was reduced from 25 to 22, the vacancies caused by the resignations of three of the draughtsmen not having been filled up.

IMBECILE ASYLUMS.

Leavesden Asylum.

(i.) Defective ward ceilings.

The renewal of practically the whole of the ward ceilings, to the defective condition of which attention was directed in our last annual report, was completed towards the close of the year, the actual cost being £2,977 8s. 10d., as against an estimated cost of £2,900.

(ii.) Bridges between blocks.

A proposal to provide 6 iron bridges of two tiers each between the blocks for male and female inmates at this asylum, in accordance with the plan prepared by the Engineer-in-chief, at an estimated cost of £7,000, was approved by the Managers on 4th November last, but had not received the sanction of the Local Government Board at the close of the year.

(iii.) Gas supply. After much correspondence, and several interviews between the Engineer-in-chief and representatives of the Company, the Managers, on 20th May last, decided to enter into an agreement with the Watford Gas & Coke Co., to supply gas for Leavesden Asylum at the rate of 2s. per 1,000 cub. feet, the agreement to last for a period of fourteen years, and to be terminable at the option of the Managers at the end of the first seven years. Before concluding this agreement, the Managers received a report from the Engineer-in-chief in which he recommended the acceptance of the Company's offer as being conducive to economy and strongly in the interests of the Board. The results of the Board's decision to discontinue the making of their own gas at the asylum and to obtain supplies from an outside source will be awaited with interest.

Caterham Asylum.

(i) Sewage disposal.

Upon the receipt of a report from the Engineer-in-chief that the present area of land available for irrigation at this asylum did not appear to be sufficient for the large volume of sewage which has to be treated, the ground becoming water-logged and the pasture coarse, the Managers at their meeting on 18th November last, had before them a report from the Asylums Committee in which they discussed the alternatives (a) of acquiring additional land for irrigation purposes ; or (b) of disposing of the sewage by connecting the asylum sewage system with that of the Caterham Urban District Council. Having regard to all the circumstances and to the desirability of expediting the work, the Managers decided to accept the offer of the District Council to receive the sewage of the asylum into their system upon the understanding that the Managers should contribute £900 to the cost of the work which the Council have undertaken to carry out. This proposal is still under consideration by the Local Government Board.

(ii.) Minor works, etc.

The formation of a new pump-room, including the installation of a laundry engine and deep well pump at a cost of £755, and the proposed replacement at an estimated cost of £890 of machinery in the laundry at this asylum as recommended by the laundry expert, were the only other works of importance at this asylum which engaged our attention during 1911.

Darenth Asylum. The provision of additional workroom accommodation for inmates of the industrial colony at this asylum, to the slow progress of which we called attention in our last annual report, was not completed until July, when we reported to the Board that the total cost of the contract works had been £5,205 8s. 3d., or £7 8s. 3d. more than the contract sum, a result which was principally due to the savings on provisional sums nearly balancing the cost of extra works.

(ii.) Extension of water softening plant. On the 21st October last, the Managers approved a scheme prepared by the Assistant Engineer for the extension, at an estimated cost of £2,000, of the water-softening plant at this asylum. The adoption of this scheme, which was still awaiting the sanction of the Local Government Board at the end of the year, will enable the Southern Hospital, which draws its water from the asylum (from which it has hitherto been supplied with hard water only) to receive a sufficiently copious supply of softened water for all its requirements. It should, moreover, considerably reduce—if it does not actually obviate—the incrustation of pipes which now have frequently to be cleaned or renewed owing to their being in some instances almost completely occluded by lime deposit. The annual saving which it is anticipated will be effected in respect of reductions in labour and material, in cleaning, etc., fuel and repairs to boilers, is estimated at £235 when the asylum and upper hospital are in full use, and at £395 when the lower hospital is also in full use. These figures do not include any saving in the consumption of soap and soda which should follow the use of softened water in the laundry of the Southern Hospital and in the asylum generally outside the laundries, where the water is already softened.

Tooting Bec Asylum. The remedying of certain defects, and the improvement of the heating arrangements in various parts of this building at an estimated cost of £393, and the proposed provision in each of the two most recently erected blocks for patients of an electric lift at a total estimated cost of £420, are the only matters of any importance at this asylum which engaged our attention during 1911.

INFECTIOUS HOSPITALS AND RIVER AMBULANCE SERVICE.

Eastern Hospital. In October last the erection of a new discharge block at this hospital was completed at a cost of £2,901 14s. 2d., the amount of the contract having been £2,912.

Long Reach Hospital. After considerable correspondence, extending over a period of more than two years, the Local Government Board in August last, approved of the adaptation of the shore buildings at Long Reach as a self-contained hospital for smallpox purposes during non-epidemic times, in accordance with the plans which had been prepared by the Engineer-in-chief, and which were adopted by the Managers as long ago as 22nd May, 1909. These adaptation works necessitated the carrying out of certain fire-resisting and cleaning and painting works, and tenders for the whole of these works, which are estimated to cost £2,359, will shortly be invited.

North-Western Hospital. Plans prepared by Mr. T. W. Aldwinckle, architect, for the provision, at an estimated cost of £2,800, of additional isolation accommodation at this hospital by the conversion of two wards into forty separation chambers, were approved by the Managers on 1st July last, and were still under the consideration of the Local Government Board at the end of the year.

Minor Works. The acceptance of tenders for the erection of a house coal store and ashpit (£539) and the installation of a new steam main (£194) at the North-Eastern Hospital; the conversion of a discharge room into a nurses' messroom (£102), the provision of a new heating boiler (£139), and the provision of additional bathroom accommodation (£117) at the North-Western Hospital; repairs to dolphins at North Wharf (£370); the erection of a house for the steward at the Western Hospital (£673); and alterations and additions to the steward's office at the Northern Hospital (£226) are instanced as some of the various minor works with the execution of which we were concerned during 1911, at the Board's infectious hospitals.

INSTITUTIONS FOR CHILDREN.

Queen Mary's Hospital. The past year witnessed the completion of works at this hospital comprising (a) the centralisation of the heating and hot water services and the extension of the gas supply; (b) the erection of an economiser house and the formation of a pump and heater room; and (c) repairs and alterations to the roads, the total value of these works amounting approximately to £20,000.

(i.) Sundry Works.

(ii.) Additional buildings. The plans prepared by the Engineer-in-chief and approved by the Managers in October, 1910, for the erection at this hospital of a recreation hall and schoolrooms at a total estimated cost of £10,080, together with the plans adopted in February, 1911, for the provision of additional isolation accommodation at a total estimated cost of £14,242, formed the subject of a conference with the Local Government Board in the early part of the year. The result of such conference was that the Board requested that, with a view to effecting a reduction in the estimated expenditure, the whole of these plans might be reconsidered by the Managers in connection with matters discussed at the conference. At the request of the Children's Committee the Engineer-in-chief was subsequently instructed to submit a revised scheme in conjunction with the medical superintendent of the hospital, but owing to Mr. Hatch's prolonged absence on sick leave this revised scheme had not been formulated at the close of the year.

The Downs School. The inadequacy of the heating arrangements at this school formed the subject of a report which the Children's Committee submitted to the Managers at the last meeting of the Board in 1911, when sanction was given to the carrying out without delay of certain improvements, at an estimated cost of £992, and we hope shortly to submit to the Managers a tender for the necessary works.

Sundry works. Few works of importance have been carried out during 1911 at the other institutions for children, the only works which call for mention having been the installation of additional laundry machinery in the Park Hospital (£850); the provision of guards for arches, staircases, etc., at the same hospital (£340); and the substitution of new inverted incandescent gas burners for the old flat flame burners at the White Oak School (123). In connection with this last work, it is satisfactory to report that the saving effected during the first year by the lower consumption of gas, less the cost of renewals, amounted to £122 1s. 2d., so that the new burners practically paid for themselves in twelve months.

LAND AMBULANCE STATIONS.

Sundry minor works of utility were carried out at the land ambulance stations during 1911, but none were of sufficient importance to call for special mention.

(Signed) F. J. OLDMAN,

Chairman.

WORKS COMMITTEE.

APPENDIX.

INSTITUTION.	Expenditure during 1910.			Nett reduction upon expenditure for 1908.	Expenditure during 1911.			Nett result of expenditure as compared with 1910.	Nett reduction upon expenditure for 1908 (during 1911).
	Gas.	Elec- tricity.	Renewals.		Gas.	Elec- tricity.	Renewals.		
Central Stores
Tooting Bee Asylum
North Eastern Hospital
North Western Hospital
Western Hospital and Ambulance Station
South Western Hospital and Ambulance Station
South Eastern Hospital and Ambulance Station
Mead Ambulance Station
Queen Mary's Hospital
The Downs School

ANNUAL REPORT OF THE CONTRACT COMMITTEE FOR THE YEAR 1911.

We submit our annual report for the year 1911.

- (1) **Number and approximate value of contracts.** The number of contracts for supplies of major importance entered into by the Board during the year was 500, representing approximately an aggregate value of £270,500. The following table classifies the contracts in question :—

	Number of Contracts.	Approximate Total Value.
Provisions	201	£ 155,500
Necessaries (<i>i.e.</i> , soap, soda, oilman's goods, paints, and the like)	91	18,000
Stores goods (<i>i.e.</i> , linen and woollen goods, drapery, clothing, hardware, brushware, boots and shoes, and the like)	147	37,000
Coal and coke (including delivery)	61	60,000
	500	£270,500

In addition 77 minor contracts for miscellaneous supplies were entered into. No reliable estimate of the values of these contracts can be given.

- (2) **Analysis of supplies.** The following table shews the number of samples and classes of supplies analysed during the year and the results of analysis :—

Description.	Satisfactory.	Unsatisfactory.	Total.
Milk	58	21	79
Provisions	423	83	506
Necessaries	374	55	429
Drugs	36	2	38
TOTALS	891	161	1,052

Unsatisfactory samples represent 15·3 per cent. of total number analysed—a decrease of 3·5 from the previous year's percentage of 18·8. In explanation of the comparatively few milk analyses it should be stated that the practice for some years past has been for all deliveries of milk at the Managers' institutions to be tested with the Gerber apparatus before acceptance and for samples to be sent for confirmatory analysis only where the Gerber test shews milk to be below the acceptable standard.

(3) Increased cost of living and some steps taken to counteract it. The progressively increasing cost of living has received much attention of late years. Many authorities on statistics and economics have published comparative statements and charts, all showing that the cost of most provisions and commodities in general daily use is much higher now than it was, say, ten years ago. To the Managers, responsible as they are for the efficient and economical maintenance at the public expense of a total daily population of about 18,000 persons, this question is one of great importance; we have accordingly given it our close and continuous attention for years past, seeking by all means in our power to counteract the effect on the cost of the Managers' supplies of the upward tendency of prices. In our annual reports for past years, and in the comprehensive report on contracts and supplies which was before the Managers in 1909 appears some record of the means adopted by us to that end.

Briefly, those means may be classified under two heads:—(i.) improved methods of purchase (including purchase direct from producers or manufacturers—as in the case of coal, soda, cotton, woollen and linen piece goods, crockery and glass, furniture, etc.), and (ii.) the introduction of less costly, but equally efficient, descriptions of goods (including many articles purchased on chemical and technical specifications in place of similar goods of proprietary brands). We have thought it inexpedient, for obvious reasons, to publish details of all the changes made from time to time in those directions, but we feel that the Managers should know that the total reduction effected by those changes in recurrent expenditure on three classes of supplies only, viz. :—provisions, coal, and domestic requisites, now exceeds £12,000 a year. That figure is based on actual prices and consumption. In addition to that sum must be reckoned the saving effected on many other classes of goods by our policy of purchasing in bulk instead of under period contracts, of purchasing ordinary commercial articles instead of goods requiring to be made specially, and of eliminating duplicate articles, *i.e.*, two or more articles intended for the same purpose. The reduction of cost necessarily resulting from the continual application of that policy to the Managers' extensive purchases is not easily calculated, but that it is substantial must be obvious to all.

(Signed) B. PORTMAN,

Chairman.

ANNUAL REPORT OF THE STATISTICAL COMMITTEE FOR THE YEAR 1911.

We submit our report for the year 1911 upon the statistics concerning :—

- (1) The notification of cases of infectious disease in the Metropolis ;
- (2) The work of the ambulance service ; and
- (3) The inmates of the various institutions under the Managers' control.

I.—INFECTIOUS DISEASES.

Notification Statistics. (1.) During the year there were notified in the Metropolis 31,203 (21,710)* cases of infectious disease. Of these 19,155 (17,428) were legally admissible to the Managers' hospitals. The remainder included 4,845 cases of erysipelas, 4,346 of chickenpox, 1,869 of measles (notifiable in the Borough of Stepney only) and 302 (292) cases of puerperal fever. Out of the admissible cases 16,158 (14,800)† or 84·3 (84·9) per cent. were admitted.

Since 1890, the first complete year in which compulsory notification was in force, the proportion of admissions to the total number of legally admissible cases has steadily increased (with the exception of a decrease in the year 1893, see p. 112, and slight decreases in the years 1895 and 1906) from 33·6 to 86·8 per cent. in 1908. In 1909 and 1910 there were slight decreases and last year the percentage fell to 84·3, a decrease of 2·5 per cent. as compared with 1908. The figures are as follow :—

1890	..	..	..	33·6 per cent.	1901	..	..	..	74·7 per cent.
1891	..	..	..	36·7 „	1902	..	..	..	77·2 „
1892	..	..	..	43·2 „	1903	..	..	..	78·9 „
1893	..	..	..	36·9 „	1904	..	..	..	80·0 „
1894	..	..	..	52·2 „	1905	..	..	..	84·6 „
1895	..	..	..	50·3 „	1906	..	..	..	84·0 „
1896	..	..	..	52·4 „	1907	..	..	..	85·7 „
1897	..	..	..	58·5 „	1908	..	..	..	86·8 „
1898	..	..	..	65·5 „	1909	..	..	..	86·5 „
1899	..	..	..	68·1 „	1910	..	..	..	84·9 „
1900	..	..	..	70·6 „	1911	..	..	..	84·3 „

* Italic figures in brackets throughout are the corresponding figures for 1910.

† Excluding Tottenham and other extra-metropolitan cases.

STATISTICAL COMMITTEE.

CHART showing the mean number of **SCARLET FEVER** patients remaining under treatment each week, also the number of cases notified and the number admitted into Hospital during each week of 1911 (uncorrected for mistakes in diagnosis).

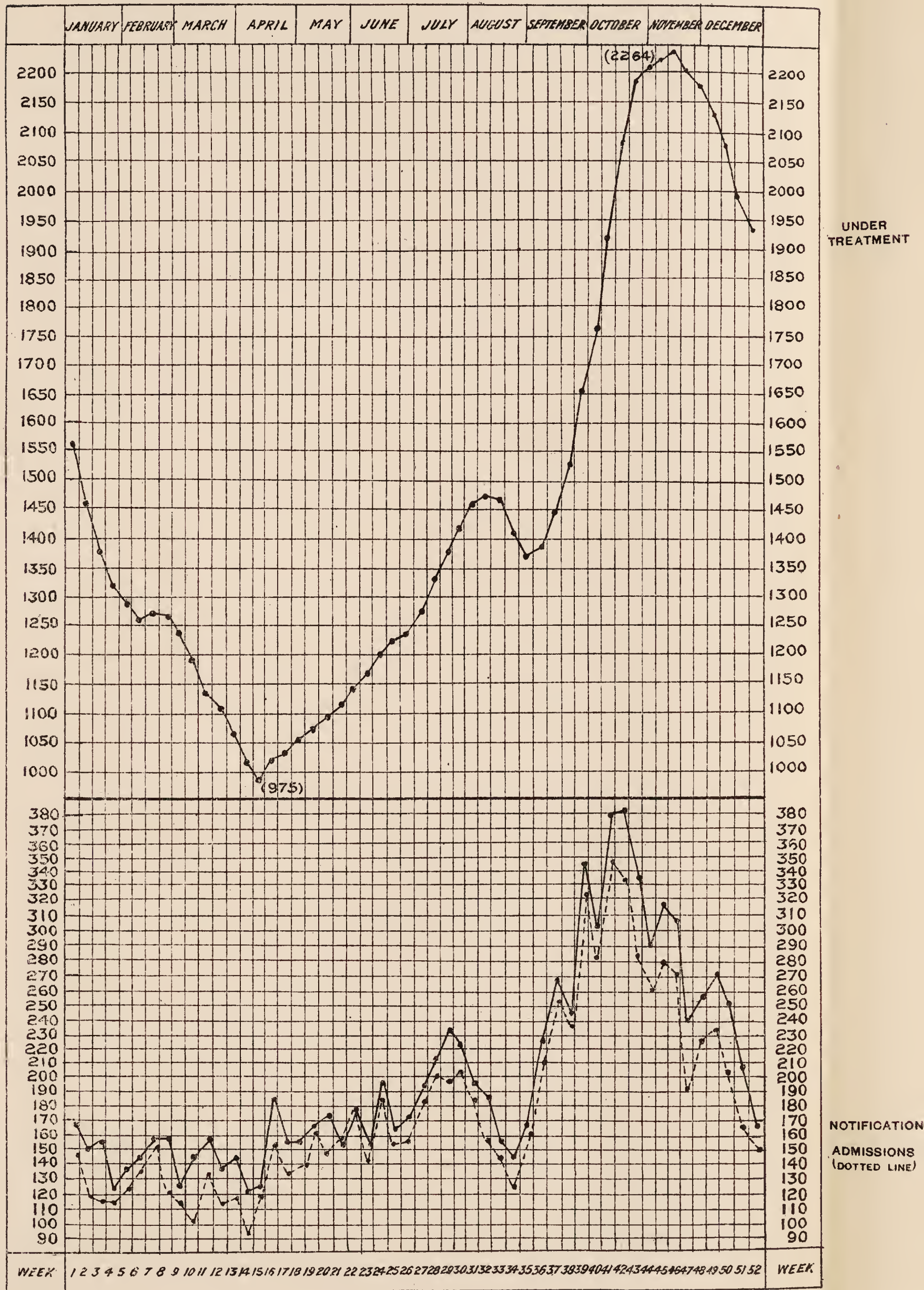


CHART showing the mean number of DIPHTHERIA patients remaining under treatment each week, also the number of cases notified, and the number admitted into Hospital during each week of 1911
(uncorrected for mistakes in diagnosis).

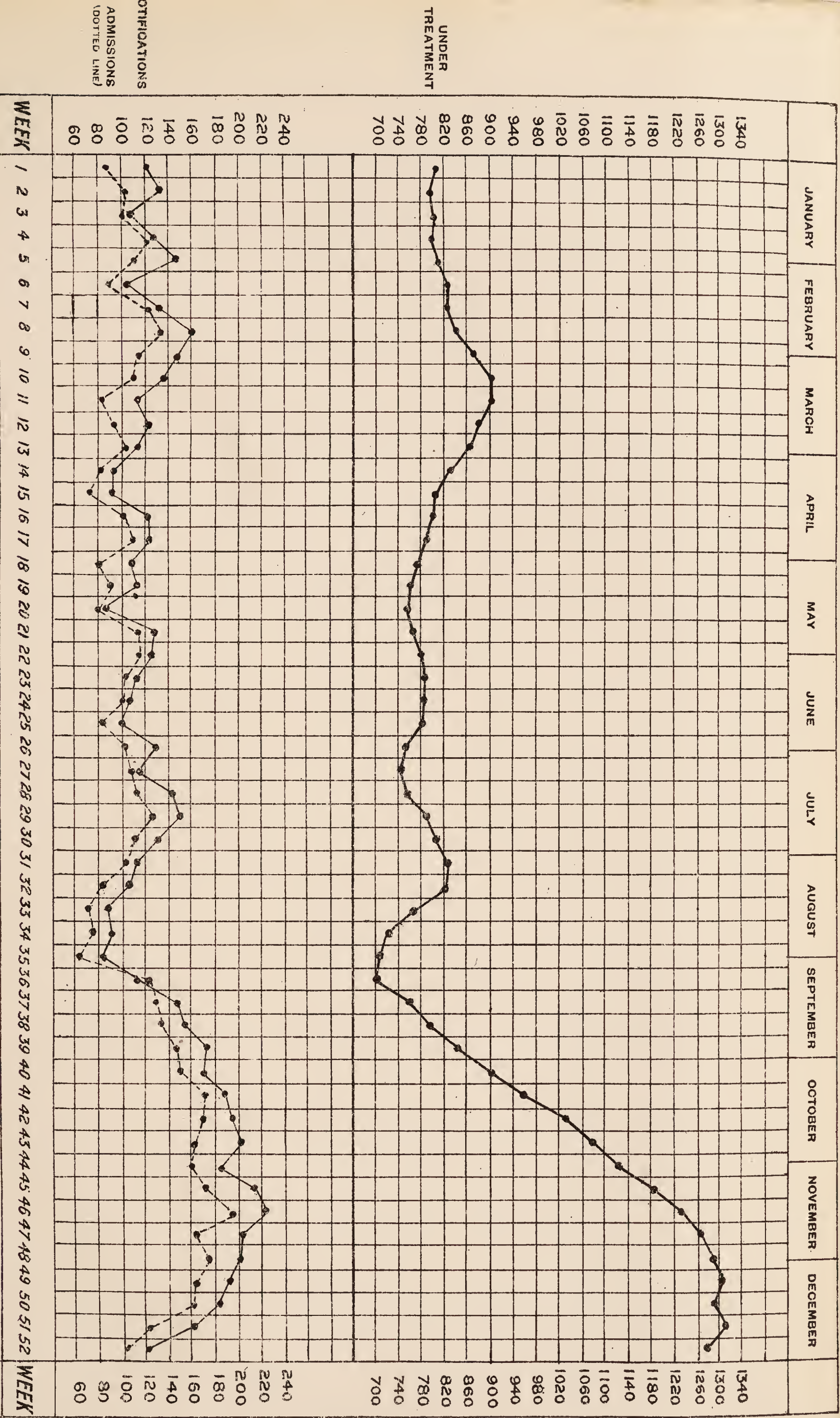
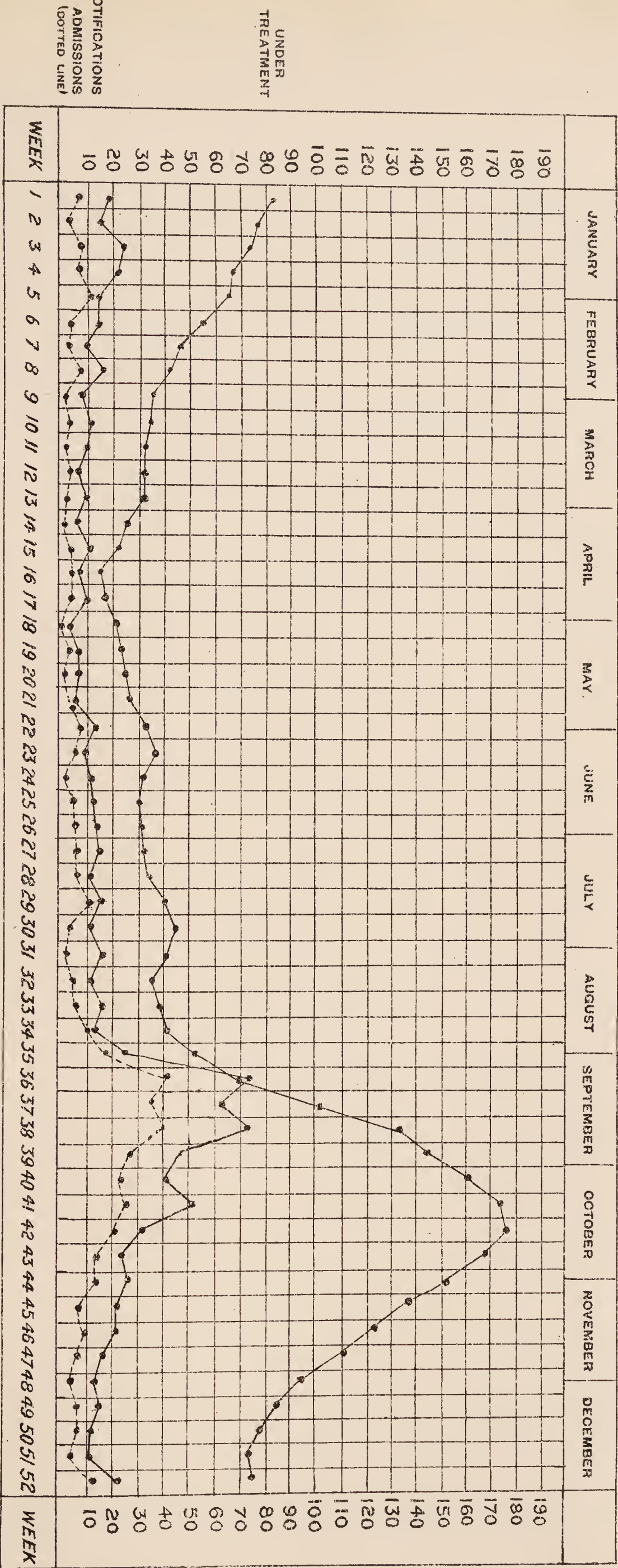




CHART showing the mean number of ENTERIC FEVER patients remaining under treatment each week, also the number of cases notified, and the number admitted into Hospital during each week of 1911 (uncorrected for mistakes in diagnosis).



STATISTICAL COMMITTEE.

CHART showing the mean number of **MEASLES** (black line) and **WHOOPING COUGH** (dotted line) patients remaining under treatment during each week of 1911 (uncorrected for mistakes in diagnosis).

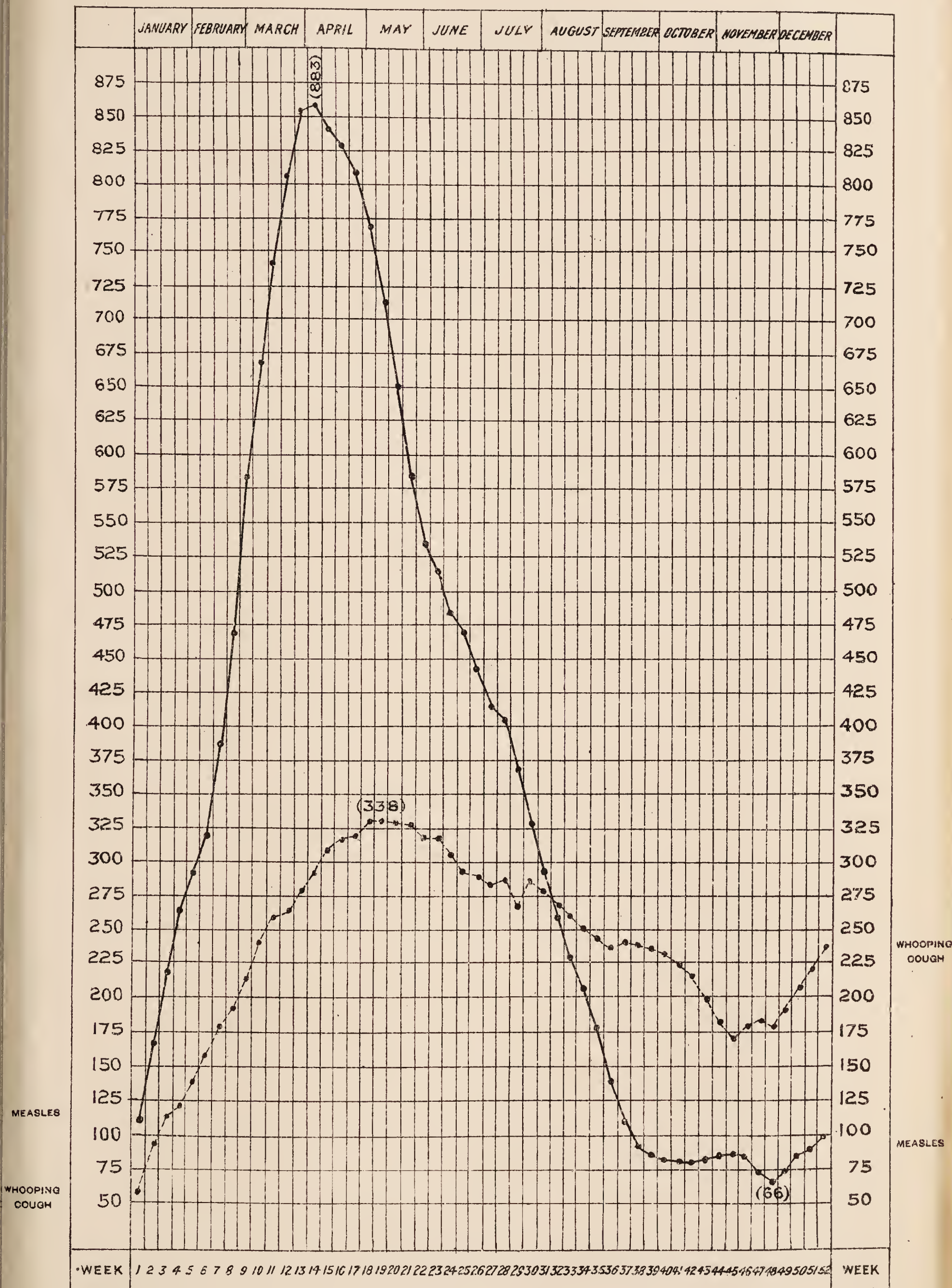




Table A, p. 113, shows the number of notifications of, and deaths from those notifiable diseases which are admissible to the Managers' hospitals, the ratio of such notifications and deaths to the population, the number of notifications of other notifiable diseases, and the grand total of cases notified during 1911. The notification rates per 1,000 persons living were 6·6 and 6·4 in Greenwich and Woolwich respectively, as compared with an average rate for London of 4·2.

Facing this page we give three charts tracing the course throughout the year of scarlet fever, diphtheria, and enteric fever. Each chart shows week by week (a) the notifications of the disease to which it relates, (b) the admissions to the Board's hospitals, and (c) the mean number of patients under treatment. We also include a chart showing the mean weekly number remaining under treatment of measles and whooping-cough cases; these diseases are not notifiable.

The following table, A1, shows the number of cases of infectious disease admissible to the Managers' hospitals which were notified during the years 1890 to 1911 :—

TABLE A1.—*Number of cases of admissible diseases notified.*

	YEARS.	Scarlet.	Diphtheria.	Enteric.	Typhus.	Smallpox.	Relapsing fever.†	Continued fever.†	Cerebro-spinal meningitis.	Polio-myelitis.	TOTALS.
Average for	1890-9	212,399	105,065	33,013	178	5,971	68	1,302	—	—	357,996
Early average	1890-9	21,240	10,506	3,301	18	597	7	130	—	—	35,800
	1900	13,800	11,776	4,291	7	87	—	73	—	—	30,034
	1901	18,381	11,968	3,194	20	1,700	—	48	—	—	35,311
	1902	18,252	10,538	3,407	4	7,796	2	47	—	—	40,046
	1903	12,531	7,582	2,339	22	416	—	40	—	—	22,930
	1904	13,439	7,073	1,896	3	489	1	29	—	—	22,930
	1905	19,461	6,358	1,552	9	74	1	14	—	—	27,469
	1906	20,329	8,045	1,600	7	31	2	9	—	—	30,023
	1907	25,925	8,771	1,394	5	8	—	36	132	—	36,271
	1908	22,071	8,002	1,357	4	4	—	13	85	—	31,536
	1909	17,254	6,679	1,043	7	21	3	17	111	—	25,135
Average for	1900-9	181,443	86,792	22,073	88	10,626	9	326	328	—	301,685
Early average	1900-9	18,144	8,679	2,207	9	1,063	1	33	33	—	30,168
	1910	10,509	5,494	1,284	3	7	1	15	115	—	17,428
	1911	10,483	‡7,385	1,022	1	72	—	23	101	68	19,155

It is seen from the above figures that there was a slight drop in the numbers of cases of scarlet fever notified during 1911 as compared with 1910, but as compared with the average for the ten years 1900-9, there were 7,661 fewer cases. There was an increased prevalence of diphtheria, 1,891 more cases being notified in 1910, but the total for the year was 1,294 below the average for the ten years 1900-9. Enteric fever cases also were fewer by 262 than in the previous year and were less than half of the ten years' average.

† Although relapsing and continued fevers are admissible to the Managers' hospitals, few cases so certified have been reported in.
‡ Including 126 cases of membranous croup.

In considering the question of the amount of hospital accommodation which should be provided to meet the wants of the Metropolis, a point of great importance is, the proportion which the hospital admissions bear to the total number of cases. In this connection the following table is of interest:—

TABLE A2.—*Percentage of admissions to notifications of each admissible disease during the years 1890 to 1911.*

YEARS.	Scarlet.	Diphtheria.	Enteric.	Smallpox.
1890	42·8	17·9	22·5	36·7
1891	46·8	25·1	27·3	55·3
1892	48·8	30·2	25·3	66·7
1893	39·7	24·5	20·0	81·2
1894	63·9	38·9	20·2	78·4
1895	58·2	41·5	24·1	84·6
1896	62·6	39·9	27·0	61·8
1897	67·0	51·6	30·4	66·3
1898	73·2	62·1	36·6	24·8
1899	74·3	69·7	40·8	55·2
1900	75·1	72·5	47·7	73·6
1901	78·9	74·8	45·3	97·3
1902	80·3	72·9	53·2	96·3
1903	83·8	80·3	51·8	97·8
1904	84·5	79·5	51·7	101·2
1905	88·6	82·1	51·4	105·4
1906	88·5	78·4	55·1	93·5
1907	89·4	81·6	51·5	87·5
1908	90·9	84·1	50·4	—
1909	90·2	85·7	49·3	71·4
1910	88·9	84·8	51·7	71·4
1911	89·2	85·0	50·6	98·6

N.B.—These percentages are exclusive of extra-metropolitan cases, and are not corrected for cases of mistaken diagnosis discovered after admission to hospital, and therefore do not correspond exactly with the percentages obtained by taking the corrected admissions as shown in the fever statistical table on p. 172.

From 1890 to 1908 the proportion of scarlet fever admissions to notifications rose from 42·8 to 90·9 ; since the latter year there has been a fall to 88·9 in 1910 and to 89·2 in 1911 ; similarly, the proportion of diphtheria cases admitted, which rose from 17·9 in 1890 to 85·7 in 1909, dropped to 84·8 in 1910 and last year was 85·0 per cent. The low figures of 1893, 1895, and 1896 were due to the fact that scarlet fever and diphtheria were unusually prevalent in those years, and the Board’s hospital accommodation was inadequate.

In this connection also measles and whooping-cough have now to be reckoned with. These diseases are not notifiable ; but pauper cases are now admitted to the Board’s hospitals at the instance of Metropolitan poor law authorities, and non-pauper cases of measles are also admitted on the recommendation of medical officers of health.

The chart facing this page traces the course of scarlet fever, diphtheria, enteric fever, and smallpox month by month during each year from 1897 to 1911.

AGE AND SEX DISTRIBUTION. Table A3 exhibits the age and sex of cases notified as scarlet fever, diphtheria, and enteric fever respectively during the year. Scarlet fever and diphtheria are most prevalent amongst children : over two-thirds of the cases of each disease being under ten years of age.

METROPOLITAN ASYLUMS BOARD.

NOTIFICATION CHART—Monthly notifications, Scarlet fever, Red line —•—, Enteric fever, Green line —•—, Diphtheria, Yellow line —•—, Smallpox, Black line —•—
 N.B. The crosses indicate months including five weeks. The figures on which the Chart is based were not corrected for mistakes in diagnosis.

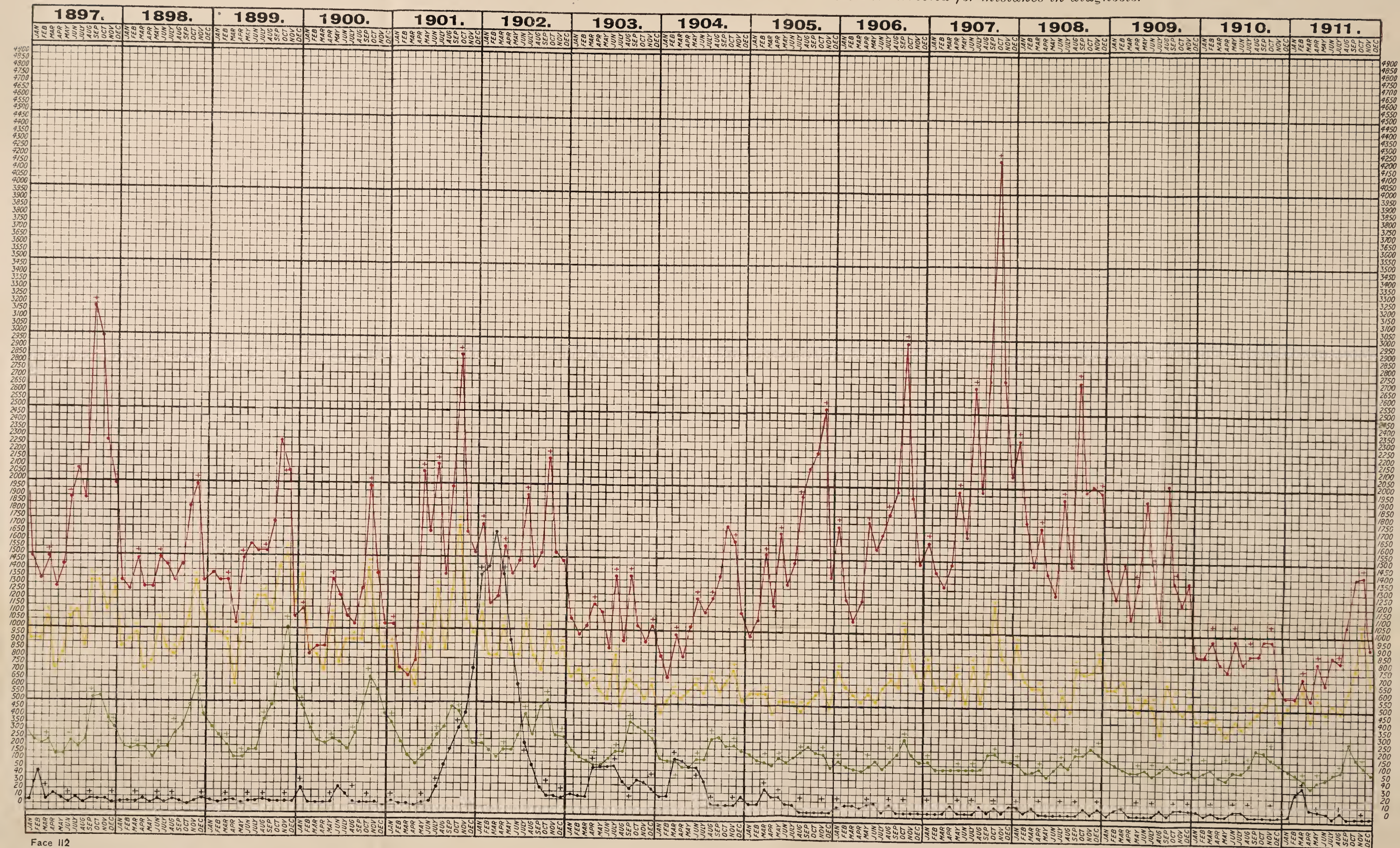


TABLE A3.—Ages of cases notified—1911.

AGES.	SCARLET FEVER.			DIPHTHERIA.			ENTERIC FEVER.		
	M.	F.	Total.	M.	F.	Total.	M.	F.	Total.
Under 1 ..	58	64	122	91	82	173	...	..	...
1 to 2 ..	199	171	370	272	198	470	...	4	4
2 „ 3 ..	313	321	634	314	259	573	3	4	7
3 „ 4 ..	445	425	870	372	359	731	7	7	14
4 „ 5 ..	471	578	1,049	402	387	789	7	5	12
Total under 5	1,486	1,559	3,045	1,451	1,285	2,736	17	20	37
5 to 10 ..	2,084	2,422	4,506	1,235	1,418	2,653	68	63	131
10 „ 15 ..	749	973	1,722	347	503	850	69	71	140
15 „ 20 ..	255	228	483	131	201	332	84	55	139
20 „ 25 ..	114	186	300	76	175	251	83	64	147
25 „ 30 ..	77	159	236	57	125	182	60	60	120
30 „ 35 ..	35	72	107	27	67	94	45	40	85
35 „ 40 ..	14	20	34	22	59	81	35	40	75
40 „ 45 ..	13	17	30	12	24	36	28	24	52
45 „ 50 ..	3	7	10	9	11	20	15	19	34
50 „ 55 ..	3	3	6	4	8	12	24	10	34
55 „ 60 ..	..	2	2	4	4	8	8	6	14
Upwards ..	..	2	2	2	2	4	6	8	14
Totals ..	4,833	5,650	10,483	3,377	3,882	7,259	542	480	1,022

Ambulance work.

2. The statistical tables concerning the work of the ambulance service will be found on pp. 156-159.

**Land service.
Infectious
removals.**

During the year 21,180 (15,238)* infectious patients were conveyed to the various hospitals of the Managers; 8,123 (6,282) patients were transferred to the convalescent and other hospitals; and 7,724 (6,249) recovered patients were brought back to London, that number including 17 (32) taken from the convalescent hospitals direct to their homes, and 7,707 (6,217) to the ambulance stations. Of the latter 164 (74) were subsequently conveyed home in consequence of their friends not attending to take charge of them. 2,047 (863) recovered patients were taken home from the acute hospitals. Further, 686 (478) persons were removed to other places than the Managers' hospitals.

**Non-infectious
removals.**

The non-infectious removals during the year were as follow :—

Imbecile cases	585	(645)
Ringworm „	1	(33)
Ophthalmia „	593	(665)
Defective and other children	472	(240)
To and from the Children's Hospitals	5,066	(4,298)
Other cases (private removals)	2,279	(1,914)
Staff	46	(39)
Total	9,042	(7,834)

**Total
removals.**

Altogether 49,183 (37,240)* removals were effected by the land ambulance service during 1911, and the various vehicles made 28,506 (22,479) journeys, and ran 355,945 (283,074) miles.

River service. The steamboats of the river ambulance service conveyed 497 (457) passengers to and from Long Reach ; of that number only 61 (7) were patients taken to the smallpox hospital ; 50 (11) recovered patients brought back to London, and 386 (439) were visitors, staff, workmen, etc.

Fires were alight on the steamboats a total of 11,916 (10,299) hours ; steam was raised on 499 (444) days ; the vessels were under steam 7,341 (6,177) hours, under way 427 (392½) hours ; they steamed 4,673 (3,987) miles, and consumed 160 (114½) tons of coal.

Hospital accommodation. 3. FEVERS, DIPHTHERIA, MEASLES AND WHOOPING COUGH.—The normal accommodation at the fever hospitals is as under :—

HOSPITAL.	No. of beds.
Eastern Hospital	382
North-Eastern Hospital (including temporary buildings)	623
North-Western Hospital (including some temporary buildings)	474
Western Hospital	452
South-Western Hospital	339
Fountain Hospital	405†
Grove Hospital	518
South-Eastern Hospital	498
Brook Hospital	568
Northern Hospital (including temporary buildings) ..	738
Southern Upper Hospital	921
„ Lower „ (as adjunct to Upper Hospital if and when required)	610
	<hr/> 6,528 <hr/>

From this total should be deducted 100 beds to the use of which the Urban District of Tottenham is entitled.

SMALLPOX.—For this disease the Managers possess the following accommodation :—

Joyce Green Hospital	940 beds
Long Reach Hospital	300 „
Orchard Hospital	800 „
Total	<hr/> 2,040 „ <hr/>

Hospital statistics. 4. FEVER.—The annual reports of the medical superintendents of the fever hospitals will be found on pp. 160-171.

On the last day of 1910 there were 2,615 (3,306) patients in the fever hospitals.

The number under treatment varied but slightly during the first few weeks of the year, and fell to the minimum for the year, 2,495, on the 2nd September (26th August, 1910, 2,039) ; then rising until the maximum for the year, 3,890, was attained on the 14th November (8th November, 1910, 2,946). Subsequently the number declined until the end of the year, when, on the 31st December, 3,612 (2,615) patients remained under treatment. The late period at which the minimum was reached was probably the effect of the admission of measles and whooping cough, diseases which, unlike scarlet fever and diphtheria, are most prevalent during the winter and spring.

* Italic figures and dates in brackets throughout are the corresponding figures and dates for 1910.
† Temporarily allocated to the reception of Imbecile patients.

ANNUAL REPORT, 1911,

Distribution of patients amongst the several fever hospitals on 2nd September, 1911 :—

Minimum number under treatment.

HOSPITAL.	BEDS OCCUPIED.						
	Scarlet.	Diph- theria.	Enteric Fever.	Measles.	Whooping Cough.	Other diseases.	TOTAL.
Eastern	47	60	12	65	..	2	186
North-Eastern.. ..	203	104	..	15	75	..	397
North-Western	137	81	15	16	..	..	249
Western	89	77	3	6	31	1	207
South-Western	92	81	8	21	..	..	202
Grove	108	67	..	..	43	..	218
South-Eastern	143	65	18	21	33	..	280
Brook	102	93	..	5	..	..	200
Northern	179	36	..	5	53	..	273
Southern	253	30	..	..	...	..	283
TOTALS	1,353	694	56	154	235	3	2,495

Distribution of patients amongst the several hospitals on 14th November, 1911 :—

Maximum number under treatment.

HOSPITAL.	BEDS OCCUPIED.						
	Scarlet.	Diph- theria.	Enteric.	Measles.	Whooping Cough.	Other diseases.	TOTAL.
Eastern	116	107	28	11	..	..	262
North-Eastern.. ..	284	166	18	2	79	..	549
North-Western	206	125	23	12	..	..	366
Western	117	116	30	1	32	..	296
South-Western	143	84	8	29	..	..	264
Grove	244	113	..	..	36	1	394
South-Eastern	201	133	23	27	22	1	407
Brook	216	183	..	..	..	..	399
Northern	343	111	..	..	9	..	463
Southern	394	96	..	..	..	..	490
TOTALS	2,264	1,234	130	82	178	2	3,890

The following table shows the number of cases of scarlet and enteric fevers and diphtheria notified in the respective borough areas, and the number of such cases which were admitted to the managers' hospitals. The managers keep their records of admissions according to the Poor Law districts to which the patients are chargeable. The areas of these districts are not in all cases co-extensive with the borough areas. Both areas are included in the table, and, in certain instances, several parishes or unions are grouped together to make a total corresponding to the borough areas.

TABLE A4—*Notifications and admissions during 1911.*

Metropolitan boroughs and populations estimated to the middle of 1911.	Corresponding Poor Law parishes and unions and populations.*	Scarlet fever.		Diphtheria (including membranous croup).		Enteric Fever (including continued fever).		Total.		Percentage of admissions to notifications.
		Notifications.	Admissions.	Notifications.	Admissions.	Notifications.	Admissions.	Notifications.	Admissions.	
Paddington .. 142,513	Paddington ..	227	201	169	148	38	15	434	364	83.9
Kensington .. 172,203	Kensington ..	232	193	219	188	23	10	474	391	82.5
Hammersmith .. 121,766	Hammersmith ..	238	196	196	178	28	20	462	394	85.3
Fulham .. 153,705	Fulham ..	381	345	313	270	41	25	735	640	87.1
Chelsea .. 66,188	Chelsea ..	143	132	83	75	7	4	233	211	90.6
City of Westminster .. 159,661	{ Strand .. 16,732 Westminster .. 25,244 St. George's W. 117,685 }	253	250	146	128	31	13	430	391	90.9
St. Marylebone .. 117,761	St. Marylebone ..	329	305	135	104	18	6	482	415	86.1
Hampstead .. 85,589	Hampstead ..	129	88	151	106	14	5	294	199	67.7
St. Pancras .. 217,941	St. Pancras ..	443	444	422	366	69	28	934	838	89.7
Islington .. 327,203	Islington ..	805	723	594	497	73	35	1,472	1,255	85.3
Stoke Newington 50,644	{ Hackney .. 273,267	710	595	393	304	52	40	1,155	939	81.3
Hackney .. 222,623	{ Holborn .. 111,737 Bloomsbury .. 24,921 }	299	303	262	205	91	59	652	567	87.0
Holborn .. 49,092	City of London ..	23	33	22	36	8	6	53	75	†141.5
Finsbury .. 87,566	Shoreditch ..	240	210	175	144	22	12	437	366	83.8
City of London .. 19,466	Bethnal Green ..	243	234	201	187	32	18	476	439	92.2
Shoreditch .. 111,199	{ Stepney .. 53,573 St. George-in-the-E. 47,040 Whitechapel .. 67,449 Mile End O.T. .. 111,247 }	467	454	517	489	80	28	1,064	971	91.3
Bethnal Green .. 128,144	Poplar ..	376	332	284	214	66	28	726	574	79.1
Stepney .. 279,309	Southwark ..	480	465	293	271	47	19	820	755	92.1
Poplar .. 162,274	Bermondsey ..	302	284	254	220	26	14	582	518	89.0
Southwark .. 191,531	Lambeth ..	763	683	404	351	61	34	1,228	1,068	87.0
Bermondsey .. 125,775	{ Wandsworth .. 481,166	1,220	1,053	736	577	95	56	2,051	1,686	82.2
Lambeth .. 297,957	Camberwell ..	633	531	352	283	35	18	1,020	832	81.6
Battersea .. 167,712	{ Greenwich .. 185,696 Lewisham .. 175,327 Woolwich .. 127,622 }	1,545	1,375	1,063	915	81	47	2,689	2,337	86.9
Wandsworth .. 313,454	Port Sanitary Authority ..	2	—	1	—	8	—	11	—	—
Camberwell .. 261,380	Totals	10,483	9,429	7,385	6,256	1,046	540	18,914	16,225	85.8
Deptford .. 109,472										
Greenwich .. 95,973										
Lewisham .. 161,713										
Woolwich .. 121,487										
4,521,301										

N.B.—The admissions in this table are not corrected for mistakes in diagnosis, and extra-metropolitan cases are not included.

† This apparent anomaly is occasioned by the removal to the Managers' hospitals of a number of "in-patients" from St. Bartholomew's Hospital. These patients are **notifiable** to the districts in which the patients reside, but are **chargeable** to the City of London Union (the union in which the hospital is situated). If they be deducted from the admissions, the percentage becomes reduced to 88.7.

* Populations are the same as in the boroughs unless otherwise stated.

The total monthly admissions were lowest in August (*August*)* and highest in October (*October*).

The accompanying chart shows the monthly admissions of each kind of fever from and including the year 1897, and of measles and whooping cough during 1910-11.

During the forty years which have elapsed since the first of the Managers' fever hospitals was opened, the scarlet fever admissions fell to the minimum for the year once in January, fifteen times in February, five times in March, nine times in April, five times in June, once in September, and four times in December; while the maximum number of admissions was reached once in January (1888), twice in July, seven times in September, twenty-two times in October, six times in November, and twice in December. The enteric fever admissions fell to the minimum for the year five times in March, fourteen times in April, eleven times in May, eight times in June, and twice in July; and rose to the maximum once in January, once in May, eight times in September, eighteen times in October, eleven times in November, and once in December.

Diphtheria cases were first admitted to the Managers' hospitals in October, 1888. Since then the minimum admissions have occurred twice in January, four times in February, once in March, eight times in April, three times in May, once in June, thrice in August, and once in September; while the maximum admissions took place once in January, four times in July, once in August, twice in September, nine times in October, thrice in November, and thrice in December.

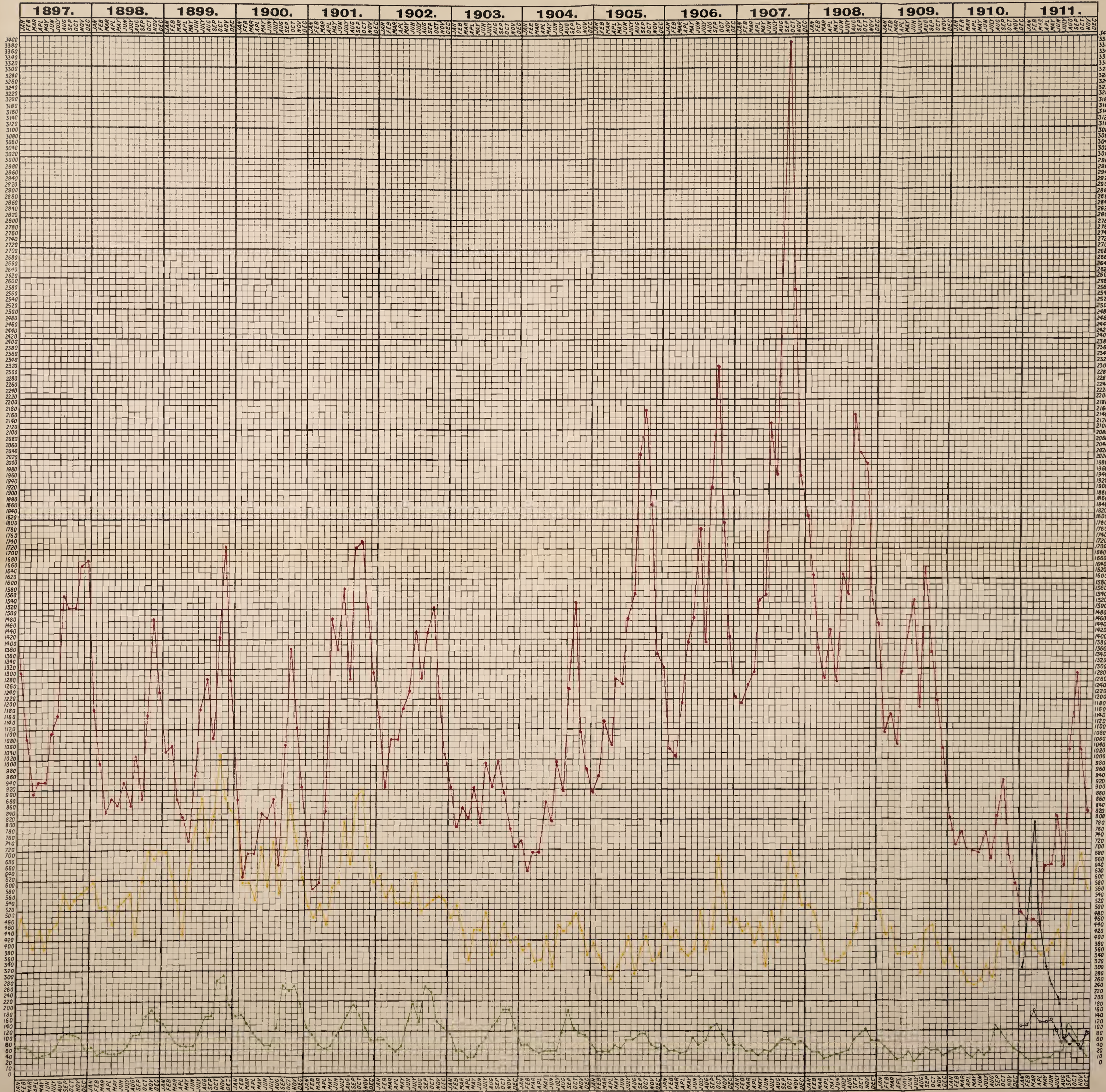
Measles and whooping cough cases were first admitted in the latter part of 1910. Of both diseases the maximum admissions were received during 1911 in March, and the minimum in November.

The maximum death-rate in 1911 was for scarlet fever in July (*March*), for diphtheria in April (*December*), for enteric in October (*October*), for measles in January, and for whooping cough in April. The minimum rate was for scarlet fever in October (*December*), for diphtheria in May (*April*), for enteric fever in February (*April*), for measles in September, and for whooping cough in October.

Months in italics in brackets are the corresponding months for 1910.

METROPOLITAN ASYLUMS BOARD.

FEVER CHART—MONTHLY ADMISSIONS—Scarlet fever, Red line—, Enteric fever Green line—, Diphtheria, Yellow line —, Measles Black line—, Whooping Cough, —



FISHES AND
UNIONS.

Bensington

Hammersmith

ulham

addington

helsea

. George W.

estminster

. Marlow

. Pant

ampstead

Kings

Kings

Kingsbury

Kings

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TABLE III.—GEOGRAPHICAL DISTRIBUTION.—*Summary of admissions and deaths of patients during 1911.*

ISHES AND IONS.	ADMISSIONS.										DEATHS.									
	Scarlet.	Diphtheria.	Diphtheria bacteriolog.	Enteric.	Measles.	Whooping cough.	Typhus.	Cerebro- spinal fever.	Other diseases.	Total admissions.	Scarlet.	Diphtheria.	Diphtheria bacteriolog.	Enteric.	Measles.	Whooping cough.	Typhus.	Cerebro- spinal fever.	Other diseases.	Total deaths.
ington ..	182	158	2	5	94	41	...	...	56	538	2	13	...	3	7	2	...	...	5	32
umersmith	186	160	...	17	43	41	...	...	45	492	5	25	...	7	8	5	...	...	9	59
am ..	324	242	2	13	53	42	...	...	56	732	5	20	...	4	7	2	...	...	4	42
ldington ..	167	111	16	9	83	49	...	...	56	491	4	9	...	2	9	4	...	...	2	30
sea ..	121	58	7	2	35	32	...	...	26	281	1	5	...	...	5	4	...	...	2	17
George's, W.	157	67	...	6	22	56	...	...	38	346	3	4	...	...	2	4	...	...	1	14
minster ...	40	26	...	...	8	2	...	...	14	90	1	4	...	...	2	...	...	...	...	7
Marylebone	291	68	22	5	138	79	...	...	42	645	7	2	...	...	11	10	...	...	1	31
Pancras ..	395	282	30	16	114	106	...	...	131	1,074	10	25	...	3	20	18	...	...	11	87
apstead ..	80	89	9	3	47	8	...	...	16	252	...	12	...	...	3	...	...	...	...	15
gton ..	656	381	37	22	177	104	...	...	204	1,581	18	34	...	4	24	7	...	...	6	93
dney ..	551	209	23	26	210	51	...	...	157	1,227	14	13	...	5	38	9	...	...	8	87
msbury ..	71	15	6	3	...	...	...	...	10	105	1	...	...	...	...	...	...	...	...	1
nd ..	30	10	1	...	1	...	...	...	9	51	...	2	...	...	...	...	...	...	1	3
orn ..	201	117	36	47	110	68	...	...	73	652	9	12	...	5	17	9	...	...	6	58
on, City of	32	29	4	4	4	...	...	...	8	81	1	3	...	...	2	...	...	...	...	6
editch ..	185	96	14	8	139	20	...	...	74	536	7	10	...	1	33	3	...	...	5	59
nal Green	209	113	13	8	175	54	...	1	121	694	5	16	1	...	27	4	...	...	11	64
echapel ...	84	97	2	4	79	7	...	...	60	333	3	5	...	...	12	...	...	...	1	21
George's E.	47	44	3	1	123	9	...	...	36	263	...	2	...	...	18	1	...	...	1	22
ney ..	91	81	23	4	95	24	...	...	54	372	1	6	4	...	19	1	...	...	6	37
End O.T.	160	92	6	7	113	10	...	...	76	464	3	3	...	1	25	2	...	...	2	36
ur ..	292	168	13	17	222	37	...	...	102	851	8	21	...	2	30	6	...	...	10	77
unwark ..	426	236	2	15	134	27	...	...	71	911	7	24	...	1	13	4	...	...	4	53
ondsey ..	260	175	14	12	34	30	...	...	56	581	6	5	2	1	11	5	...	...	1	31
beth ..	637	292	5	23	175	77	...	...	*175	1,384	8	34	...	4	19	11	...	...	6	82
olsworth ...	973	453	45	36	418	111	...	2	180	2,218	13	31	...	5	56	17	...	2	9	133
erwell ..	489	256	8	9	116	39	...	...	72	989	5	15	...	2	10	6	...	...	1	39
lwich ..	576	354	5	7	68	34	...	1	70	1,115	10	25	...	1	4	4	...	...	2	46
lwich ..	436	201	4	8	45	4	...	...	63	761	3	13	...	...	3	1	...	...	3	23
hham ..	286	277	2	17	61	15	...	1	42	701	7	24	...	3	3	4	...	...	2	43
of London	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
hham ..	181	76	2	4	...	1	...	...	44	308	...	11	...	...	...	1	...	...	3	15
ld Met. Area	2	1	...	2	8	6	...	...	...	19	...	...	...	...	...	...	...	...	...	...
TOTALS ..	8,818	5,034	356	360	3,144	1,184	...	5	2,237	21,138	167	428	7	54	438	144	...	2	123	1,363

* 3 Polio Myelitis.

The number of cases of scarlet fever was 6,382 below, of diphtheria 120 above, and of enteric fever 384 below the average admissions during the preceding ten years.

SCARLET FEVER.—TABLE IV.—*Admissions, deaths and mortality per cent. of scarlet fever patients during 1911, divided according to age and sex.*

AGES.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1	22	3	13·6	26	2	7·7	48	5	10·4
1 to 2	146	15	10·3	153	10	6·5	299	25	8·4
2 „ 3	290	19	6·6	297	11	3·7	587	30	5·1
3 „ 4	375	13	3·5	370	13	3·5	745	26	3·5
4 „ 5	450	15	3·3	521	8	1·5	971	23	2·4
Totals under 5 years }	1,283	65	5·1	1,367	44	3·2	2,650	109	4·1
5 to 10	1,734	22	1·3	2,032	16	0·8	3,766	38	1·0
10 „ 15	677	7	1·0	810	7	0·9	1,487	14	0·9
15 „ 20	209	1	0·5	179	1	0·6	388	2	0·5
20 „ 25	82	1	1·2	131	..	..	213	1	0·5
25 „ 30	52	1	1·9	121	1	0·8	173	2	1·1
30 „ 35	28	..	..	57	..	..	85	..	..
35 „ 40	12	..	..	14	..	..	26	..	..
40 „ 45	12	..	..	8	1	12·5	20	1	5·0
45 „ 50	4	..	..	4	..	..	8	..	..
50 „ 55 .. ..	..	..	..	1	..	..	1	..	..
55 „ 60 .. ..	..	..	..	1	..	..	1	..	..
And upwards ..	..	..	..	..	..	..	..	..	..
Grand totals ..	4,093	97	2·4	4,725	70	1·5	8,818	167	1·9

The total admissions of scarlet fever cases in 1911 were 8,818 (8,782)* ; the females were 632 (400) in excess of the male admissions. The total mortality, calculated on the admissions, was 1·9 (2·4) per cent., and was lower by 1·0 than the average for the preceding ten years.

* Italic figures in brackets throughout are the corresponding figures for 1910.

DIPHTHERIA.—TABLE V.—*Admissions, deaths, and mortality per cent. of diphtheria patients (excluding bacteriological cases) during 1911, divided according to age and sex.*

AGES.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 ..	44	10	22.7	32	16	50.0	76	26	34.2
1 to 2 ..	186	39	21.0	146	31	14.0	332	70	21.1
2 „ 3 ..	234	27	11.5	223	25	11.2	457	52	11.4
3 „ 4 ..	294	22	7.5	285	32	11.2	579	54	9.3
4 „ 5 ..	317	25	7.9	311	38	12.2	628	63	10.0
Total under 5 years }	1,075	123	11.4	997	142	14.2	2,072	265	12.8
5 to 10 ..	909	52	5.7	1,032	89	8.6	1,941	141	7.3
10 „ 15 ..	261	4	1.5	318	9	2.8	579	13	2.2
15 „ 20 ..	77	1	1.3	86	1	1.1	163	2	1.2
20 „ 25 ..	32	..	..	65	1	1.5	97	1	1.0
25 „ 30 ..	21	..	..	47	..	..	68	..	..
30 „ 35 ..	14	..	..	32	2	6.2	46	2	4.3
35 „ 40 ..	14	1	7.1	24	..	..	38	1	2.6
40 „ 45 ..	6	1	16.6	12	1	8.3	18	2	11.1
45 „ 50 ..	2	..	..	3	..	..	5	..	..
50 „ 55 ..	1	1	100.0	4	..	..	5	1	20.0
55 „ 60 ..	..	..	..	..	..	..	..	..	..
And upwards	1	..	..	1	..	..	2	..	..
Grand totals ..	2,413	183	7.6	2,621	245	9.3	5,034	428	8.5

It has been suggested that the decline in the mortality amongst cases of diphtheria, which followed the introduction of the antitoxin-serum treatment of the disease, might largely be accounted for by the inclusion of numbers of cases which were certified as diphtheria after the bacteriological test only. Therefore, such cases have been shown separately in Table I. It is very satisfactory to find that, notwithstanding the exclusion of the bacteriological cases from the above Table V., the death rate, calculated on the admissions, for last year was 8.5 (in 1910 the rate was 7.7 the lowest on record), as compared with a rate of 30 per cent. before the introduction of antitoxin, and it was 1.4 below the average rate for the preceding ten years. Diphtheria is usually more fatal to males than females, but last year 16 out of 32 females under one year of age died, and the total female mortality rate was 1.7 higher than the male rate.

ENTERIC FEVER.—TABLE VI.—Admissions, deaths, and mortality per cent. of enteric fever patients during 1911, divided according to age and sex.

AGES.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 5 ...	11	..	..	7	1	14.3	18	1	5.6
5 to 10 ...	21	..	..	25	1	4.0	46	1	2.2
10 „ 15 ...	26	..	..	28	4	14.3	54	4	7.4
15 „ 20 ...	32	3	9.4	19	2	10.5	51	5	9.8
20 „ 25 ...	26	7	27.0	26	7	26.9	52	14	26.9
25 „ 30 ...	25	6	24.0	19	5	26.3	44	11	25.0
30 „ 35 ...	19	3	15.8	17	1	5.9	36	4	11.1
35 „ 40 ...	12	2	16.6	17	4	2.3	29	6	20.7
40 „ 45 ...	10	3	30.0	5	..	..	15	3	20.0
45 „ 50 ...	3	2	66.6	3	..	..	6	2	33.3
50 „ 55 ...	3	2	66.6	1	..	..	4	2	50.0
55 „ 60 ...	2	..	..	2	..	..	4	..	..
And upwards...	..	..	..	1	1	100.0	1	1	100.0
Totals ...	190	28	14.7	170	26	15.3	360	54	15.0

There were 149 fewer cases of enteric fever admitted than during 1910.
The total death-rate, calculated on the admissions, was 15.0 (15.1) per cent., which was the average rate for the preceding ten years.

MEASLES.—TABLE VII.—Admissions, deaths, and mortality per cent. of measles patients during 1911, divided according to age and sex.

AGES.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 ..	131	41	31.3	132	29	22.0	263	70	26.6
1 to 2 ..	343	84	24.5	353	86	24.4	696	170	24.4
2 „ 3 ..	305	46	15.1	271	40	14.8	576	86	14.9
3 „ 4 ..	242	27	11.1	247	26	10.5	489	53	10.7
4 „ 5 ..	208	16	7.7	223	23	10.3	431	39	9.0
Total under 5 years }	1,229	214	17.4	1,226	204	16.6	2,455	418	17.0
5 to 10 ..	272	8	2.8	339	11	4.6	611	19	3.1
10 „ 15 ..	21	1	4.8	26	..	..	47	1	2.1
15 „ 20 ..	8	..	..	3	..	..	11	..	..
20 „ 25 ..	3	..	..	7	..	..	10	..	..
25 „ 30 ..	1	..	..	3	..	..	4	..	..
30 „ 35 ..	3	..	..	1	..	..	4	..	..
35 „ 40 ..	..	..	..	2	..	..	2	..	..
40 „ 45 ..	..	..	..	..	..	..	..	..	..
45 „ 50 ..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..
Grand totals ..	1,537	223	14.5	1,607	215	13.3	3,144	438	13.9

The dangerous nature of measles when occurring amongst young children is well known ; but it should be borne in mind that the high mortality rates amongst patients treated in the Manager’s hospitals are the result of the special class of cases admitted. At present admission is confined to children of the poorest class and to urgent and necessitous cases recommended by the medical officers of health.

Italic figures in brackets throughout are the corresponding figures for 1910.

WHOOPING COUGH.—TABLE VIII.—Admissions, deaths, and mortality per cent. of whooping cough patients during 1911, divided according to age and sex.

AGES.	MALES.			FEMALES.			TOTAL.		
	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.	Admitted.	Died.	Mortality per cent.
Under 1 ..	92	29	31.5	76	20	26.3	168	49	29.2
1 to 2 ..	171	28	16.4	179	30	16.7	350	58	16.6
2 „ 3 ..	122	6	4.9	135	11	8.1	257	17	6.6
3 „ 4 ..	81	2	2.4	93	7	7.5	174	9	5.2
4 „ 5 ..	52	3	5.8	70	3	4.3	122	6	4.9
Total under 5 years }	518	68	13.1	553	71	12.8	1,071	139	13.0
5 to 10 ..	51	1	1.9	59	4	6.9	110	5	4.5
10 „ 15 ..	1	..	..	2	..	..	3	..	..
15 „ 20 ..	..	..	..	..	..	..	..	..	..
20 „ 25 ..	..	..	..	..	..	..	..	..	..
25 „ 30 ..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..
Grand totals	570	69	12.1	614	75	12.2	1,184	144	12.2

Only cases of whooping cough occurring amongst poor children are at present admissible to the Managers' hospitals and this fact probably accounts for the high mortality rates amongst the patients received during the past year.

CEREBRO-SPINAL MENINGITIS.—TABLE IX.—5 (4) cases only were admitted: 2 died (2). For details refer to Table X., p. 182.

MISCELLANEOUS DISEASES. The table of cases of miscellaneous diseases admitted will be found in the Medical Supplement, p. 230. Further reference to it is made on p. 133, "Cases of mistaken diagnosis."

LENGTH OF RESIDENCE OF PATIENTS IN HOSPITAL. The following tables show the length of residence of patients treated in the Managers' hospitals.

For scarlet fever, diphtheria, measles and whooping cough, there are two tables for each disease, dealing respectively with cases treated to termination at the Board's town hospitals and with cases which completed their treatment at the convalescent hospitals. There is also a table relating to the bacteriological cases of diphtheria who recovered or died at the town hospitals; the few such cases as were transferred to convalescent hospitals are included in Table XIIb.

Italic figures in brackets throughout are the corresponding figures for 1910.

SCARLET
FEVER
PATIENTS.

TABLE X.—*Length of residence of scarlet fever patients who completed their recovery or died at the Board's town hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.	Average residence (days).	Recovered cases only.	Number of days' residence.	Average residence (days).
Eastern	248 (130)	10,410 (6,279)	42.0 (48.3)	230 (114)	10,395 (6,027)	45.2 (52.9)
North-Eastern ..	564 (732)	32,741 (44,860)	58.0 (61.3)	531 (708)	32,255 (44,381)	60.7 (62.7)
North-Western ..	269 (512)	15,698 (35,461)	58.3 (69.3)	241 (485)	15,191 (34,935)	63.0 (72.0)
Western	344 (379)	18,892 (22,640)	54.9 (59.7)	327 (361)	18,584 (22,377)	56.8 (62.0)
South-Western ..	263 (396)	16,424 (27,461)	62.4 (69.3)	254 (374)	16,227 (27,115)	63.9 (72.5)
Grove	369 (428)	23,226 (25,990)	62.9 (60.7)	352 (407)	22,943 (25,656)	65.2 (63.0)
South-Eastern ..	558 (648)	25,879 (30,600)	46.4 (47.2)	536 (605)	25,564 (29,907)	47.7 (49.4)
Park .. ..	.. (198)	.. (13,830)	.. (69.8)	.. (191)	.. (13,739)	.. (71.9)
Brook	294 (589)	18,285 (36,460)	62.2 (61.9)	275 (564)	17,941 (35,889)	65.2 (63.6)
Totals ..	2,909 (4,012)	161,555 (243,581)	55.5 (60.7)	2,746 (3,809)	159,100 (240,026)	57.9 (63.0)

TABLE XA.—*Length of residence of scarlet fever patients who completed their recovery or died at the Board's convalescent hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.			Average residence.			Recovered cases only.	Number of days' residence.			Average residence.		
		Town hospital.	Convalescent hospital.	Total.	Town hospital.	Convalescent hospital.	Total.		Town hospital.	Convalescent hospital.	Total.	Town hospital.	Convalescent hospital.	Total.
Northern	2,536 (2,547)	84,043 (97,413)	85,283 (106,593)	169,326 (204,006)	33.1 (38.2)	33.6 (41.8)	66.7 (80.0)	2,534 (2,543)	83,962 (96,981)	85,185 (106,164)	169,147 (203,145)	33.1 (38.1)	33.6 (41.8)	66.7 (79.9)
Southern	2,995 (3,177)	92,033 (109,339)	90,404 (105,535)	182,437 (214,874)	30.7 (34.4)	30.2 (33.2)	60.9 (67.6)	2,993 (3,171)	91,977 (109,126)	90,289 (105,103)	182,266 (214,229)	30.7 (34.4)	30.2 (33.1)	60.9 (67.6)
Totals	5,531 (5,724)	176,076 (206,752)	175,687 (212,128)	351,763 (418,880)	31.8 (36.1)	31.8 (37.1)	63.6 (73.2)	5,527 (5,714)	175,939 (206,107)	175,474 (211,267)	351,413 (417,374)	31.8 (36.1)	31.7 (37.0)	63.6 (73.2)

The average duration of residence of scarlet fever cases was at the town hospitals 55.5 (60.7)* days, including deaths, and 57.9 (63.0) days if the fatal cases be excluded, or 4.8 below the average for the preceding ten years. At the convalescent hospitals the average duration was 63.6 (73.2) and 63.5 (73.1) days respectively (including residence in the town hospitals), or 2.0 days below the average for the preceding ten years. The total residence of cases who completed their recovery at the convalescent hospitals was last year 5.6 (10.1) days longer than that of cases at the town hospitals.

The period of detention at the Northern Hospital was 13.2 days shorter than in the preceding year, and 7.7 days longer than in 1905, and .7 days longer than the average for the preceding ten years.

Italic figures in brackets throughout are the corresponding figures for 1910.

DIPHTHERIA
PATIENTS.

TABLE XI.—*Length of residence of diphtheria patients (exclusive of bacteriological diphtheria patients) who completed their recovery or died at the Board's town hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.	Average residence (days).	Recovered cases only.	Number of days' residence.	Average residence (days).
Eastern	181 (130)	7,932 (6,978)	43·8 (53·7)	147 (110)	7,618 (6,684)	51·8 (60·8)
North-Eastern ..	531 (473)	32,632 (25,818)	61·5 (54·6)	463 (425)	31,832 (25,439)	68·8 (59·9)
North-Western ..	283 (277)	13,810 (15,802)	48·8 (57·0)	227 (252)	13,363 (15,444)	59·1 (61·3)
Western	339 (277)	15,065 (12,216)	44·4 (44·1)	269 (233)	14,381 (11,874)	53·5 (51·0)
South-Western ..	474 (397)	26,302 (23,237)	55·5 (58·5)	430 (359)	25,880 (22,695)	60·2 (63·2)
Grove	382 (333)	20,384 (19,879)	53·4 (59·7)	342 (306)	19,970 (19,547)	58·4 (63·9)
South-Eastern ..	585 (491)	27,139 (22,497)	46·4 (45·8)	534 (444)	26,714 (21,885)	50·0 (49·3)
Park .. ..	.. (94)	.. (5,252)	.. (55·9)	.. (86)	.. (5,107)	.. (59·4)
Brook	393 (385)	21,417 (20,195)	54·5 (52·4)	328 (361)	20,889 (19,889)	63·7 (55·1)
Totals ..	3,168 (2,857)	164,681 (151,875)	52·0 (53·2)	2,740 (2,576)	160,647 (148,564)	58·6 (57·7)

TABLE XIA.—*Length of residence of diphtheria patients who completed their recovery or died at the Board's convalescent hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.			Average residence (days).			Recovered cases only.	Number of days' residence.			Average residence (days).		
		Town hospital.	Convalescent hospital.	Total.	Town hospital.	Convalescent hospital.	Total.		Town hospital.	Convalescent hospital.	Total.	Town hospital.	Convalescent hospital.	Total.
Northern.. †	918 (468)	43,784 (21,254)	26,060 (15,546)	69,844 (36,800)	47·7 (45·4)	28·4 (33·2)	76·1 (78·6)	918 (468)	43,784 (21,254)	26,060 (15,546)	69,844 (36,800)	47·7 (45·4)	28·4 (33·2)	76·1 (78·6)
Southern.. ‡	542 (237)	24,262 (11,117)	13,333 (6,700)	37,595 (17,817)	44·8 (46·9)	24·6 (28·3)	69·4 (75·2)	542 (237)	24,262 (11,117)	13,333 (6,700)	37,595 (17,817)	44·8 (46·9)	24·6 (28·3)	69·4 (75·2)
Totals ..	1,460 (705)	68,046 (32,371)	39,393 (22,246)	107,439 (54,617)	46·6 (45·9)	27·0 (31·6)	73·6 (77·5)	1,460 (705)	68,046 (32,371)	39,393 (22,246)	107,439 (54,617)	46·6 (45·9)	27·0 (31·6)	73·6 (77·5)

* Italic figures in brackets throughout are the corresponding figures for 1910.

† Includes 36 bacteriological diphtheria cases.

‡ Includes 3 bacteriological diphtheria cases.

BACTERIOLOGICAL TABLE XI.B.—*Length of residence of bacteriological diphtheria patients who completed their recovery or died at the Board's town hospitals during the year 1911.*

HOSPITALS.	Total number of cases (including deaths).	Number of days' residence.	Average residence (days).	Recovered cases only.	Number of days' residence.	Average residence (days.)
Eastern	36 (25)	1 482 (1,091)	41.2 (43.6)	31 (25)	1,374 (1,091)	44.3 (43.6)
North-Eastern ..	64 (64)	1,554 (2,130)	24.3 (23.3)	64 (62)	1,554 (1,997)	24.3 (32.2)
North-Western ..	99 (24)	2,408 (588)	24.3 (24.5)	99 (24)	2,408 (588)	24.3 (24.5)
Western	3 (24)	29 (704)	9.7 (29.3)	3 (24)	29 (704)	9.7 (29.3)
South-Western ..	6 (8)	214 (328)	35.7 (41.0)	6 (8)	214 (328)	35.7 (41.0)
Grove	52 (25)	1,493 (690)	28.7 (27.6)	52 (25)	1,493 (690)	28.7 (27.6)
South-Eastern ..	27 (19)	719 (458)	26.6 (24.1)	25 (19)	715 (458)	28.6 (24.1)
Park .. ..	.. (3)	.. (57)	.. (19.0)	.. (3)	.. (57)	.. (19.0)
Brook	11 (12)	266 (334)	24.2 (27.8)	11 (12)	266 (334)	24.2 (27.8)
Totals ..	298 (204)	8,165 (6,380)	27.4 (31.3)	291 (202)	8,053 (6,247)	27.7 (30.9)

The average length of residence of diphtheria patients at the town hospitals was 52.0 (53.2)* days, including deaths, and 58.6 (57.7) days if the fatal cases be excluded, or 3.2 days longer than the average for the preceding ten years. At the convalescent hospitals the average residence of recovered cases (including residence in the town hospitals) was 73.6 (77.5) days or 15.0 (19.8) days longer than in the town hospitals, and 1.6 days longer than the average for the preceding ten years.

The period of detention at the Northern Hospital was 2.5 days and at the Southern Hospital 5.8 days shorter than last year.

The average length of residence of the recovered bacteriological cases was 27.7 (30.9) days, and varied from 9.7 days at the Western Hospital (19.0-P.H.) to 44.3 (43.6-E.H.) days at the Eastern Hospital.

* Italic figures in brackets throughout are the corresponding figures for 1910.

ENTERIC
FEVER
PATIENTS.

TABLE XII.—*Length of residence of enteric fever patients who completed their recovery or died at the Board's town hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.	Average residence (days).	Recovered cases only.	Number of days' residence.	Average residence (days).
Eastern	91 (109)	5,409 (6,037)	59.4 (55.4)	82 (84)	5,271 (5,594)	64.3 (66.6)
North-Eastern ..	25 (56)	1,082 (2,851)	43.3 (50.9)	19 (43)	1,017 (2,686)	53.5 (62.5)
North-Western ..	74 (33)	4,201 (1,916)	56.8 (58.1)	65 (32)	4,074 (1,910)	62.7 (59.7)
Western	59 (93)	3,167 (5,274)	53.7 (56.7)	44 (81)	3,030 (5,101)	68.9 (63.0)
South-Western ..	61 (45)	3,356 (2,745)	55.0 (61.0)	54 (35)	3,297 (2,641)	61.1 (75.5)
Grove .. ..	.. (2)	.. (127)	.. (63.5)	.. (2)	.. (127)	.. (63.5)
South-Eastern ..	85 (103)	4,479 (4,345)	52.7 (42.2)	77 (88)	4,366 (4,157)	56.7 (47.2)
Brook .. ..	.. (26)	.. (1,766)	.. (67.9)	.. (25)	.. (1,747)	.. (69.9)
Totals	395 (467)	21,694 (25,061)	54.9 (53.7)	341 (390)	21,055 (23,963)	61.7 (61.4)

The average residence of enteric fever patients was 54.9 (53.7) days, including deaths, and 61.7 (61.4) days, if the fatal cases be excluded, and 1.7 days longer than the average for the preceding ten years. The shortest residence of recovered cases was 53.5 days at the North-Eastern Hospital (*South-Eastern Hospital 47.2*), or 8.2 (14.2) days below the average, and the longest 68.9 days at the Western Hospital (*South-Western Hospital 75.5*), or 7.2 (14.1) days above the average.

Italic figures in brackets throughout are the corresponding figures for 1910.

MEASLES.

TABLE XIII.—*Length of residence of patients suffering from measles who completed their recovery or died at the Board's town hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.	Average residence (days).	Recovered cases only.	Number of days' residence.	Average residence (days).
Eastern	552 (16)	17,716 (507)	32.1 (31.7)	403 (12)	15,933 (482)	39.5 (40.2)
North-Eastern ..	172 (46)	7,054 (1,369)	41.0 (29.8)	152 (41)	6,778 (1,276)	44.6 (31.1)
North-Western ..	482 (17)	18,104 (376)	37.6 (22.1)	415 (11)	17,339 (297)	41.7 (27.0)
Western	282 (24)	8,372 (529)	29.7 (22.0)	242 (16)	7,824 (452)	32.3 (28.2)
South-Western ..	435 (31)	16,757 (946)	38.5 (30.5)	385 (21)	16,073 (872)	41.7 (41.5)
Grove	67 (10)	3,391 (222)	50.6 (22.2)	56 (9)	3,189 (216)	56.9 (24.0)
South-Eastern ..	303 (30)	10,452 (671)	34.5 (22.4)	257 (26)	9,771 (648)	38.0 (24.9)
Park .. ..	.. (2)	.. (104)	.. (52.0)	.. (2)	.. (104)	.. (52.0)
Brook	386 (8)	15,888 (310)	41.2 (38.7)	333 (8)	15,077 (310)	45.3 (38.7)
Totals	2,679 (184)	97,734 (5,034)	36.5 (27.4)	2,243 (146)	91,984 (4,657)	41.0 (31.9)

TABLE XIII.A.—*Length of residence of patients suffering from measles who completed their recovery or died at the Board's convalescent hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.			Average residence (days).			Recovered cases only.	Number of days' residence.			Average residence (days).		
		Town hospital.	Convalescent hospital.	Total.	Town hospital.	Convalescent hospital.	Total.		Town hospital.	Convalescent hospital.	Total.	Town hospital.	Convalescent hospital.	Total.
Northern ..	418	13,801	10,079	23,880	33.0	24.1	57.1	416	13,744	10,047	23,791	33.0	24.1	57.1
Southern ..	64	2,562	2,201	4,763	40.0	34.4	74.4	64	2,562	2,201	4,763	40.0	34.4	74.4
Totals ..	482	16,363	12,280	28,643	33.9	25.5	59.4	480	16,306	12,248	28,554	33.9	25.5	59.4

The average length of residence of measles cases in the town hospitals was 36.5 days, including deaths, and 41.0 days if the fatal cases be excluded. At the convalescent hospitals the average residence of recovered cases was 59.4 days, or 18.4 days longer than in the town hospitals.

The periods of detention of recovered cases varied from 32.3 days at the Western Hospital to 56.9 days at the Grove Hospital and 74.4 at the Southern Hospital.

Italic figures in brackets throughout are the corresponding figures for 1910.

WHOOPING
COUGH.

TABLE XIV.—*Length of residence of patients suffering from whooping cough who completed their recovery or died at the Board's town hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.	Average residence (days).	Recovered cases only.	Number of days' residence.	Average residence (days).
Eastern	1 (4)	60 (137)	60·0 (34·2)	1 (4)	60 (137)	60·0 (34·2)
North-Eastern ..	228 (7)	17,291 (260)	75·8 (37·1)	173 (6)	15,911 (246)	92·0 (41·0)
North-Western ..	1 (4)	18 (121)	18·0 (30·2)	1 (4)	18 (121)	18·0 (30·2)
Western	129	6,904	53·5	106	6,436	60·7
South-Western ..	2	44	22·0	2	44	22·0
Grove	184 (7)	15,352 (243)	83·4 (34·7)	147 (7)	14,024 (243)	95·4 (34·7)
South-Eastern ..	151 (3)	7,840 (48)	51·9 (16·0)	125 (3)	7,101 (48)	56·8 (16·0)
Park .. ..	..	..	..	..	..	..
Brook	3 ..	71 ..	23·7 ..	1 ..	37 ..	37·0 ..
Totals ..	699 (25)	47,580 (809)	68·1 (32·4)	556 (24)	43,631 (795)	78·5 (33·1)

TABLE XIVA.—*Length of residence of patients suffering from whooping cough who completed their recovery or died at the Board's convalescent hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.			Average residence (days).			Recovered cases only.	Number of days' residence.			Average residence (days).		
		Town hospital.	Convalescent hospital.	Total.	Town hospital.	Convalescent hospital.	Total.		Town hospital.	Convalescent hospital.	Total.	Town hospital.	Convalescent hospital.	Total.
Northern..	287	13,316	10,424	23,740	46·4	36·3	82·7	286	13,273	10,410	23,683	46·4	36·4	82·8
Southern..	5	520	121	641	104·0	24·4	128·4	5	520	121	641	104·0	24·4	128·4

The average length of residence of whooping cough cases in the town hospitals was 68·1 days, including deaths, and 78·5 days if the fatal cases be excluded. At the Northern convalescent hospital the average residence of recovered cases was 82·8 days (only five cases were treated at the Southern Hospital).

The periods of detention of recovered cases varied from 56·8 days at the South-Eastern Hospital to 95·4 days at the Grove Hospital and 82·8 days at the Northern Hospital.

CEREBRO-
SPINAL
MENINGITIS
PATIENTS.

TABLE XV.—*Length of residence of cerebro-spinal fever patients who completed their recovery or died at the Board's town hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.	Average residence (days.)	Recovered cases only.	Number of days' residence.	Average residence (days).
Eastern	1 (1)	48 (16)	48.0 (16.0)	1 ..	48 ..	48.0 ..
North-Western ..	.. (2)	.. (129)	.. (64.5)	.. (2)	.. (129)	.. (64.5)
Western	1 ..	2 ..	2.0..	....	....	....
Grove	1 ..	12 ..	12.0..	....	....	....
South-Eastern ..	1 ..	62 ..	62.0 ..	1 ..	62 ..	62.0 ..
Brook	1 (1)	118 (26)	118.0 (26.0)	1 ..	118 ..	118.0 ..
Totals ..	5 (4)	242 (171)	48.4 (42.7)	3 (2)	228 (129)	76.0 (64.5)

MISCEL-
LANEOUS
DISEASES.

TABLE XVI.—*Length of residence of patients suffering from miscellaneous diseases who completed their recovery or died at the Board's town hospitals during the year 1911.*

HOSPITAL.	Total number of cases (including deaths).	Number of days' residence.	Average residence (days).	Recovered cases only.	Number of days' residence.	Average residence (days).
Eastern	418 (226)	9,652 (5,691)	23.1 (25.2)	385 (212)	9,298 (5,449)	24.1 (25.7)
North-Eastern ..	357 (368)	8,381 (9,431)	23.5 (25.6)	343 (355)	8,241 (9,291)	24.0 (26.2)
North-Western ..	326 (248)	7,600 (5,836)	23.3 (23.5)	305 (235)	7,436 (5,786)	24.4 (24.6)
Western	221 (135)	4,284 (2,954)	19.4 (21.9)	200 (124)	4,198 (2,763)	21.0 (22.3)
South-Western ..	181 (125)	5,159 (3,570)	28.5 (28.6)	168 (116)	5,068 (3,487)	30.1 (30.1)
Grove	218 (194)	5,348 (4,378)	24.5 (22.6)	212 (188)	5,324 (4,343)	25.1 (23.1)
South-Eastern ..	295 (254)	4,846 (4,335)	16.4 (17.1)	283 (241)	4,760 (4,132)	16.8 (17.1)
Park .. ..	.. (64)	.. (2,145)	.. (33.5)	.. (63)	.. (2,142)	.. (34.0)
Brook	193 (127)	3,780 (3,315)	19.6 (26.1)	190 (120)	3,757 (3,286)	19.8 (27.4)
Totals ..	2,209 (1,741)	49,050 (41,655)	22.2 (23.9)	2,086 (1,654)	48,082 (40,679)	23.0 (24.6)

Of the cases of miscellaneous diseases (cases of mistaken diagnosis) reated, the average residence of each patient was 22.2 (23.9) days, including deaths, and 23.0 (24.6) days if the fatal cases be excluded. The shortest residence of recovered cases was at the South-Eastern Hospital 16.8 (*South-Eastern Hospital, 17.1*) days, or 6.2 (7.5) days below the average, and the longest at the South-Western Hospital, 30.1 (*Park Hospital, 34.0*) days, or 7.1 days above the average.

Italic figures in brackets throughout are the corresponding figures for 1910

SMALLPOX PATIENTS. Of smallpox patients, 70 were treated during the year ; 59 were discharged recovered and 11 died. Average residence 29.53 days including deaths and 33.76 if the fatal cases be excluded.

The following table is a condensed form of Table 1 (Smallpox Statistics) on page 184A.

	Admissions.	Deaths.	Mortality. per cent.
A. Vaccinated Class :—			
A 1. Half and upwards of half square inch total area of cicatrices ..	31	..	..
A 2. One-third, but less than half ditto	8	1	12.5
A 3. Less than one-third ditto ..	7	..	..
A 4. Area not recorded .. ..	..	..	..
Totals of Vaccinated class ..	46	1	2.18
B. Doubtful class	2	1	50.0
C. Unvaccinated class	22	9	40.9
Totals ..	70	11	15.7

The report of the Medical Superintendent of the Smallpox Hospital will be found on page 188.

CASES OF MISTAKEN DIAGNOSIS. *Fever.*—In the course of the year 1911 no fewer than 2,237 (1,723) patients, or a percentage on the total admissions of 10.6 (11.3) were, after admission at the fever hospitals, found not to be suffering from the diseases mentioned in the medical certificates upon which they were removed to hospital (Table XVII., Medical Supplement, pp. 230-234). The largest number of cases admitted to any one hospital, was at the Eastern Hospital (*Eastern Hospital*), where the proportion was 433 (222) out of 2,446. (1,246)* admissions, or 17.7 (17.8) per cent. of the total. The percentage on the total scarlet fever cases was 8.7 (9.5), diphtheria cases 12.7 (14.1), and enteric fever cases 34.2 (24.8).

Amongst the 843 (918) cases wrongly certified as scarlet fever there were 182 (224) of German measles, 140 (131) of tonsillitis, 201 (226) of erythema, 137 (115) had no obvious disease or were not diagnosed. Amongst the 783 (599) cases wrongly certified as diphtheria were 485 (401) of tonsillitis, 24 (11) had no obvious disease or were not diagnosed. Amongst the 187 (168) cases wrongly certified as enteric fever were 15 (13) of influenza, 10 (12) of tuberculosis, 39 (21) of pneumonia, 10 (5) had no obvious disease or were not diagnosed.

On reference to Table XVI., p. 132, it will be noted that these cases were detained in hospital on an average 22.2 (23.9) days.

Smallpox.—In the case of smallpox, the original medical certificates are revised by a medical officer of the Board at the London wharves: 91 persons were certified as suffering from smallpox and removed to the wharves. The diagnosis was confirmed in 70 cases, showing a percentage of mistakes in diagnosis of 22.0.

Italic figures in brackets throughout are the corresponding figures for 1910.

Statistics since establishment of the Managers' hospitals. (5) FEVER.—The return on p. 135 shows the annual admissions and deaths of patients at the Managers' fever hospitals, with the mortality per cent. since the establishment of the first hospital in 1870, together with extracts from the Registrar-General's annual summaries showing the annual mortality per 1,000 persons living of the population of the Metropolis from scarlet, typhus, and enteric fevers and diphtheria, measles and whooping cough.

The incidence of scarlet fever, diphtheria and enteric fever on the population of the metropolis during the past 12 years is further illustrated by the accompanying chart A and the case mortality by chart B.

The lowest incidence rates for scarlet fever were 2·16 in 1910, for diphtheria 1·13 in 1910, and for enteric fever ·21 in 1909, and the highest were 5·4 in 1907, 2·63 in 1901, and ·95 in 1900 respectively, while the lowest case mortality for scarlet fever was 1·6 in 1911, for diphtheria 7·9 in 1910, and for enteric fever 13·9 in 1907, and the highest 3·1 in 1902, 13·1 in 1900, and 16·7 in 1900 respectively.

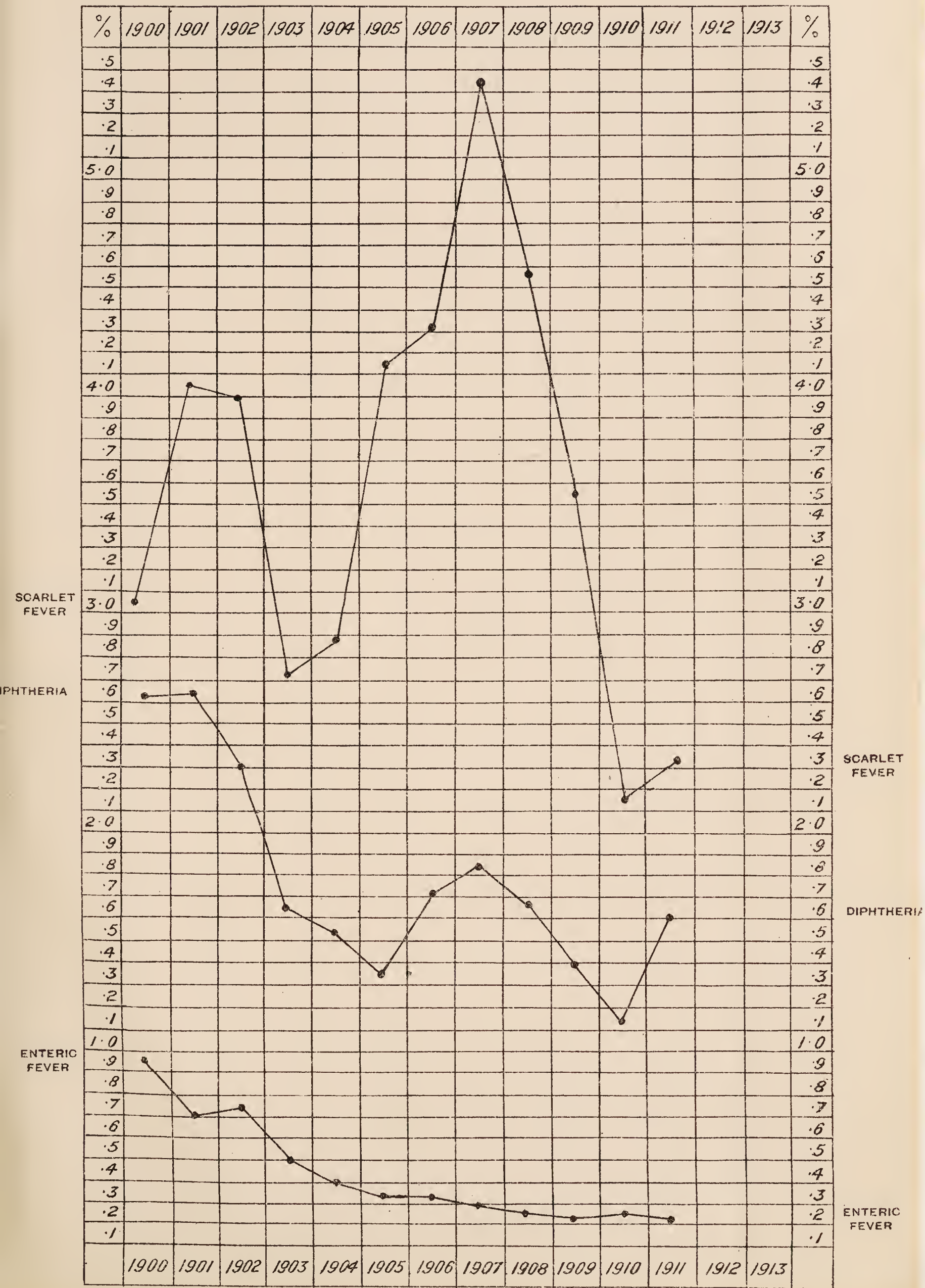
Antitoxin treatment of diphtheria.

We submit the charts, C, D and E, which summarise the results of the antitoxin treatment of diphtheria in the Board's hospitals during the years 1895-1911 as compared with the results obtained before the use of that treatment.

A report by Professor G. Sims Woodhead and Dr. G. E. Cartwright Wood on the laboratory work and preparation of diphtheria antitoxin carried out at the bacteriological establishments of the Board during 1911 will be found on pp. 210-2.

* *Italic figures in brackets throughout are the corresponding figures for 1910.*

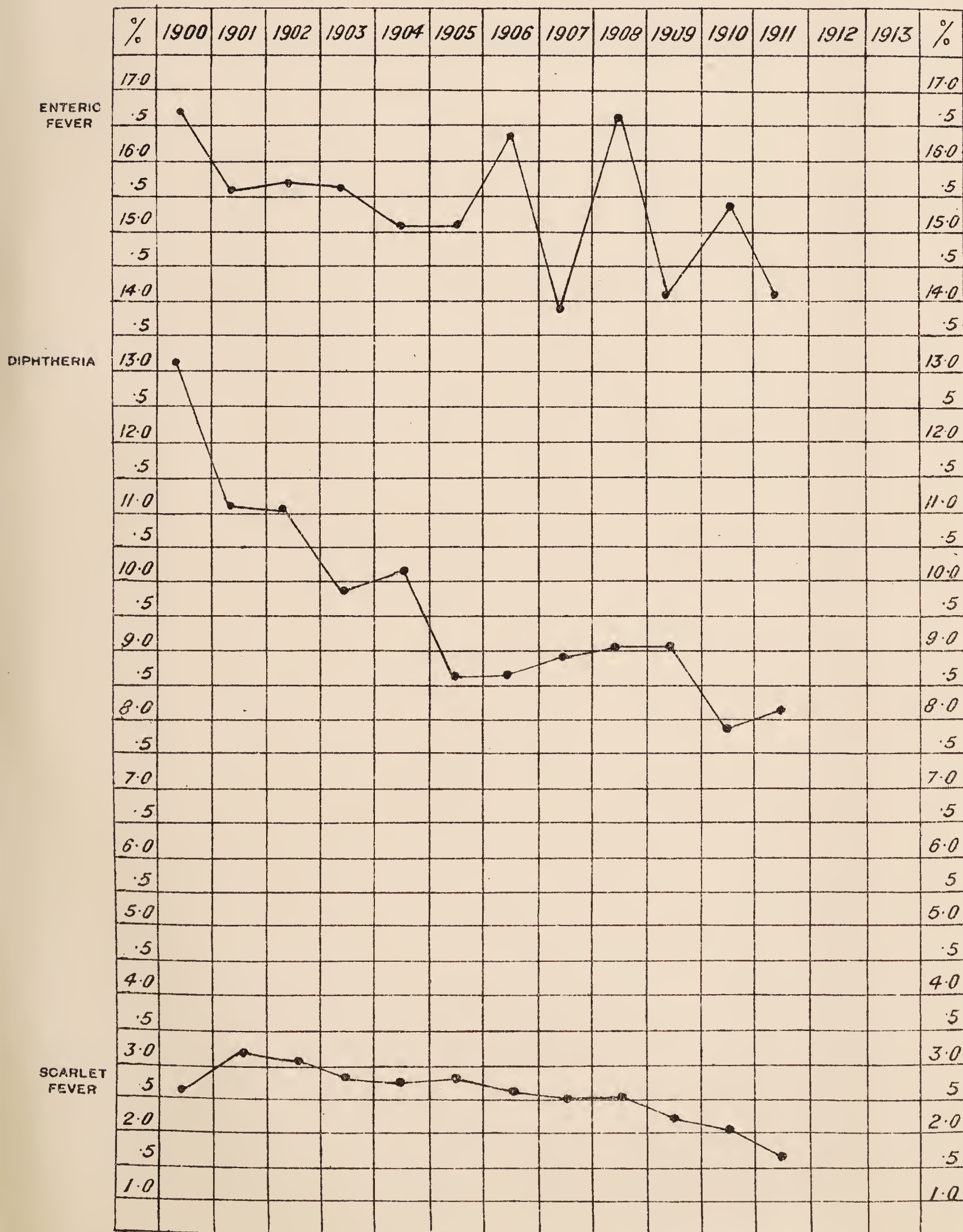
CHART A, showing the incidence of SCARLET FEVER, DIPHTHERIA, and ENTERIC FEVER per 1,000 of the population of the Metropolis, during each of the twelve years 1900-1911.





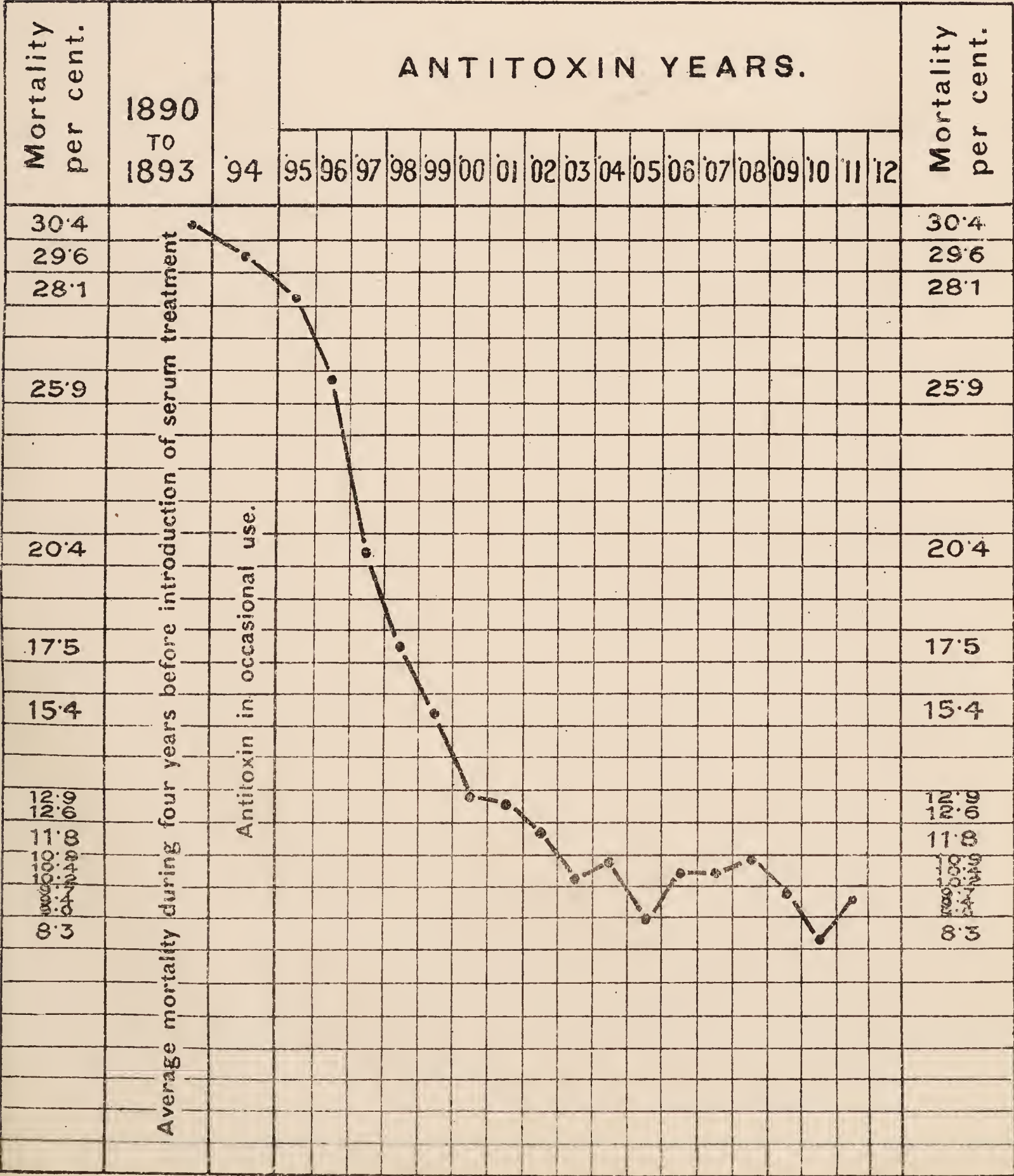
STATISTICAL COMMITTEE, 1911.

CHART-B, showing the case mortality from **SCARLET FEVER**, **DIPHTHERIA**, and **ENTERIC FEVER** in the Metropolis, during each of the twelve years 1900-1911.

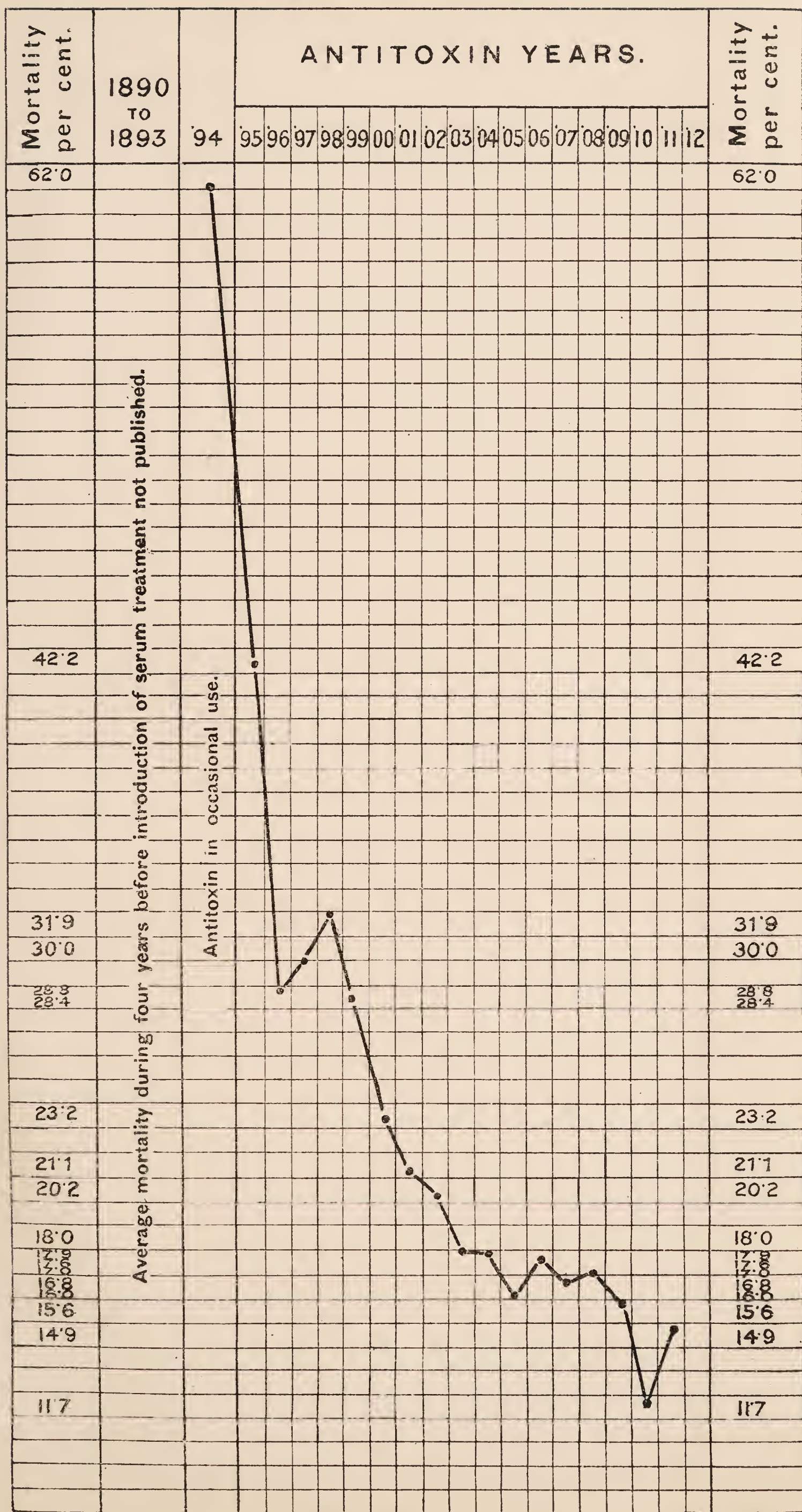


CHARTS showing the mortality rates amongst diphtheria patients at the Board's hospitals, before and after the introduction of the antitoxin treatment of diphtheria.

C.—All forms of diphtheria.



D.—Laryngeal cases.



E. —Tracheotomy cases.

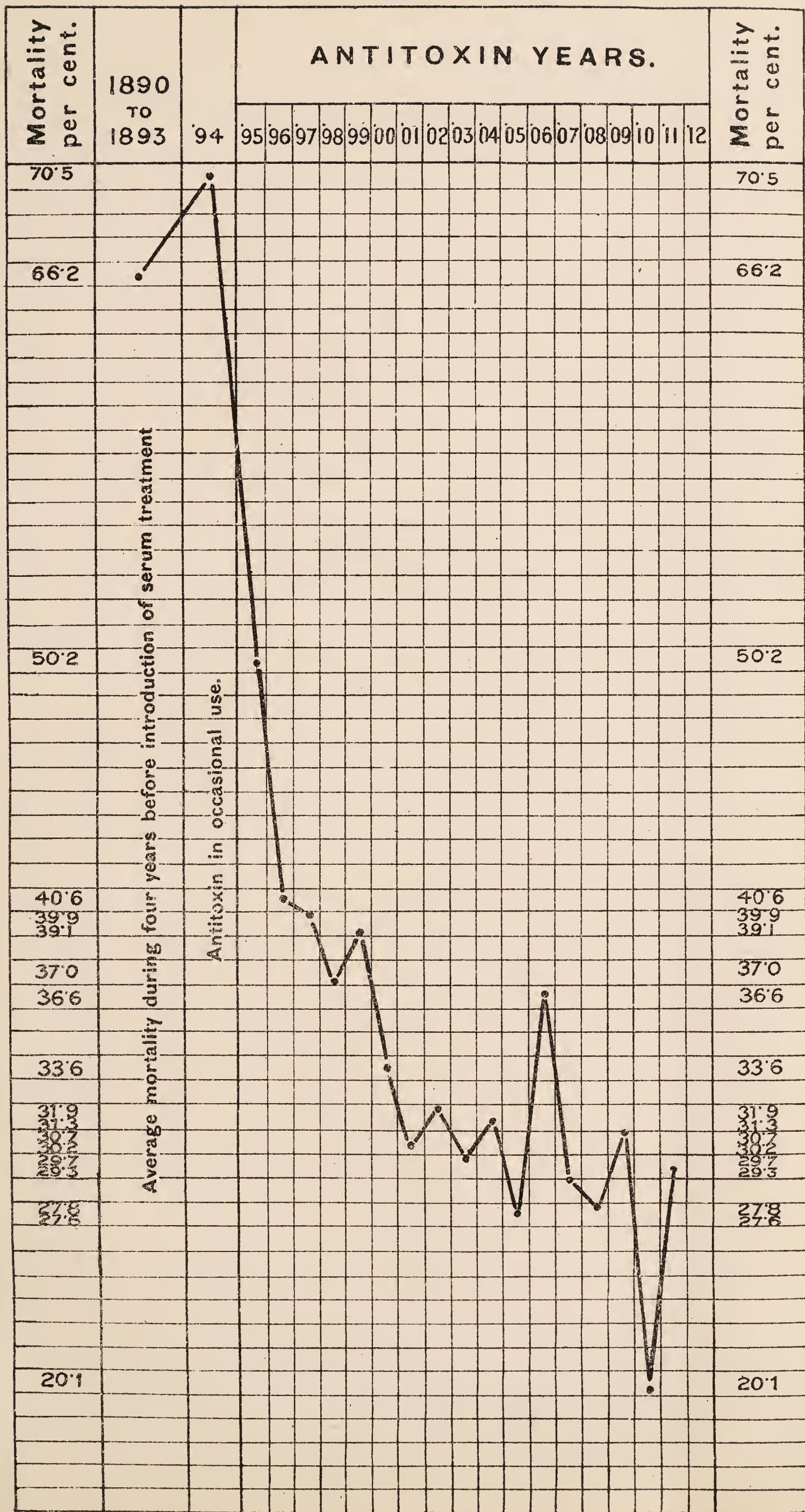


TABLE XVII.—Admissions, deaths, and mortality at the FEVER HOSPITALS.

YEAR.	ADMISSIONS.										DEATHS.										Mortality per cent. of patients treated in Managers' hospitals.						Annual mortality per 1,000 of estimated population. (Registrar-General).																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
	Scarlet.	Diphtheria.	Diphtheria bacterio-logical.	Typhus.	Enteric.	Measles.	Whooping cough.	Other diseases.	Total.	Scarlet.	Diphtheria.	Diphtheria bacterio-logical.	Typhus.	Enteric.	Measles.	Whooping cough.	Other diseases.	Total.	Scarlet.	Diphtheria.	Typhus.	Enteric.	Measles.	Whooping cough.	Scarlet.	Diphtheria.	Typhus.	Enteric.	Measles.	Whooping cough.	Scarlet.	Diphtheria.	Typhus.	Enteric.	Measles.	Whooping cough.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
1870 to 1874	1,004	1,071	1,095	973	*4,361	106	227	176	212	†735	10.5	..	59.3	21.2	16.1	0.73	0.09	0.10	0.26	0.67	0.13	0.03	0.24	0.82	0.14	0.02	0.19	0.55	0.17	0.02	0.25	0.52	0.22	0.01	0.25	0.36	0.24	0.01	0.23	0.18	0.23	0.01	0.15	0.17	0.21	0.00	0.15	0.36	0.23	0.00	0.15	0.30	0.32	..	0.17	..	0.19	0.39	0.00	0.13	0.21	0.33	0.00	0.15	0.14	0.34	0.00	0.13	0.27	0.46	0.00	0.10	0.37	0.76	0.00	0.16	0.22	0.62	0.00	0.15	0.19	0.54	..	0.14	..	0.21	0.60	0.00	0.13	0.18	0.51	0.00	0.13	0.13	0.39	0.00	0.13	0.09	0.43	0.00	0.18	0.08	0.35	0.00	0.17	0.13	0.30	0.00	0.12	0.12	0.25	0.00	0.13	0.08	0.16	0.00	0.08	0.08	0.16	..	0.06	..	0.12	0.12	..	0.05	0.11	0.15	..	0.06	..	0.14	0.17	..	0.04	0.11	0.15	..	0.05	0.08	0.13	..	0.03	0.04	0.09	..	0.04	0.41	0.28	0.57	0.23</

NOTE.—From 1st December, 1870, to the end of September, 1871, smallpox cases only were admitted to the Board's hospitals. 2. The deaths of fever patients include those deaths due to intercurrent maladies. 3. Diphtheria cases have been admitted into the Managers' hospitals since 23rd October, 1888. The use of antitoxin serum in the treatment of diphtheria began in 1894. 4. The mortality rates of patients in the Managers' hospitals are calculated according to the Registrar-General's formula, i.e., by dividing the deaths multiplied by 100, by half the sum of the admissions, discharges, and deaths for the year.

* Includes 218 cases of relapsing fever in 1870. + Includes 14 deaths from relapsing fever in 1870.

TABLE XVIII.—Summary of number of cases of laryngeal and non-laryngeal post-scarlatinal diphtheria at the Board's hospitals during the years 1896-1911.

YEAR.	LARYNGEAL CASES.					NON-LARYNGEAL CASES.					ALL CASES.				
	Cases.	Total deaths.	Deaths from causes other than diphtheria.	Deaths from diphtheria.	Diphtheria mortality per cent.	Cases.	Total deaths.	Deaths from causes other than diphtheria.	Deaths from diphtheria.	Diphtheria mortality per cent.	Cases.	Total deaths.	Deaths from causes other than diphtheria.	Deaths from diphtheria.	Diphtheria mortality per cent.
1896	79	18	1	17	29.5	626	18	5	13	2.1	705	36	6	30	4.3
1897	119	10	1	9	7.6	677	20	5	15	2.2	796	30	6	24	3.0
1898	82	5	1	4	4.9	579	19	4	15	2.6	661	24	5	19	2.9
1899	84	10	..	10	11.9	608	15	3	12	2.0	692	25	3	22	3.2
1900	27	4	..	4	14.8	378	8	6	2	0.5	405	12	6	6	1.5
1901	40	9	1	8	20.0	340	14	10	4	1.2	380	23	11	12	3.2
1902	55	11	4	7	12.7	369	10	4	6	1.6	424	21	8	13	3.1
1903	29	1	..	1	3.4	246	2	1	1	0.4	275	3	1	2	0.7
1904	18	1	..	1	5.6	193	2	..	2	1.0	211	3	..	3	1.4
1905	29	4	..	4	13.8	189	1	..	1	0.5	218	5	..	5	2.3
1906	23	3	1	2	8.7	165	2	..	2	1.2	188	5	1	4	2.1
1907	23	2	1	1	4.3	225	5	1	*4	1.8	248	7	2	5	2.0
1908	32	2	..	2	6.2	343	4	1	3	0.9	375	6	1	5	1.3
1909	27	..	..	..	..	272	4	..	4	1.5	299	4	..	4	1.3
1910	9	..	..	..	..	156	1	1	..	..	165	1	1	..	..
1911	9	1	..	..	11.1	110	..	..	..	..	119	1	..	..	.8

* Includes 1 death from heart failure due to diphtheria, but the condition was complicated by whooping cough.

In the Medical Supplement (p. 224) is a table relating to 3,864 cases of diphtheria treated during the year 1911 and showing the day of the disease on which anti-toxin treatment was commenced. The rate of mortality amongst cases treated on the first day of the disease was 2.7 per cent.; on the second day 3.4 per cent.; on the third day 8.9 per cent.; on the fourth day 12.6 per cent.; and on the fifth day and later 13.4 per cent.

SMALLPOX. (6.) The following table shows the admissions and deaths of patients in the Managers' smallpox hospitals during each year since the opening of the first hospital at the end of 1870 :—

TABLE XIX.—Admissions, deaths, and mortality per cent. of smallpox patients since 1st December, 1870, together with the annual mortality per 1,000 persons living of the population of the Metropolis from smallpox, extracted from the Registrar-General's annual summaries.

YEAR.	ADMISSIONS.			DEATHS.			Mortality per cent. of patients treated in Managers' hospitals.	Total annual mortality per 1,000 of estimated population.
	Smallpox.	Other diseases.	Total.	Smallpox.	Other diseases.	Total.	Smallpox.	Smallpox.
1st Dec., 1870, to 3rd Feb., 1871	582	..	582	97	..	97	20·8	..
1871-2 (4th Feb., 1871, to 31st Jan., 1872)	13,139	6	13,145	2,460	..	2,460	18·9	2·42
1872-3 (year ended 31st Jan., 1873)	2,359	3	2,362	467	1	468	17·8	0·54
1873-4 (year ended 31st Jan., 1874)	174	17	191	35	..	35	17·0	0·03
1874 (11 months ended 31st Dec.)	112	8	120	10	..	10		0·02
1875	89	22	111	22	..	22		0·01
1876	2,134	16	2,150	372	1	373	21·6	0·21
1877	6,516	104	6,620	1,214	4	1,218	17·9	0·71
1878	4,558	96	4,654	824	9	833	18·0	0·39
1879	1,628	60	1,688	273	5	278	15·7	0·12
1880	1,982	50	2,032	286	2	288	15·9	0·12
1881	8,551	120	8,671	1,417	14	1,431	16·6	0·62
1882	1,799	55	1,854	260	3	263	13·0	0·11
1883	598	28	626	93	..	93	16·1	0·03
1884	6,363	204	6,567	940	3	943	16·0	0·31
1885	6,146	198	6,344	1,052	3	1,055	15·8	0·36
1886	99	33	132	22	2	24	14·3	0·01
1887	56	3	59	3	..	3		0·00
1888	62	5	67	8	..	8		0·00
1889	5	..	5	..	..	..	7·3	..
1890	22	5	27	3	..	3		0·00
1891	63	1	64	8	..	8		0·00
1892	325	23	348	35	..	35	11·3	0·01
1893	2,376	*118	2,494	180	2	182	7·6	0·05
1894	1,117	*120	1,237	102	7	109	8·9	0·02
1895	941	*81	1,022	64	1	65	6·4	0·01
1896	190	*41	231	9	1	10	5·4	..
1897	70	*26	96	13	1	14		
1898	5	*9	14	..	..	..
1899	18	*18	36	3	..	3	15·7	0·00
1900	66	*19	85	3	..	3		
1901	1,743	*107	1,850	257	3	260		
1902	7,916	*608	8,524	1,337	5	1,342	16·6	0·28
1903	355	*80	435	12	1	13	5·4	..
1904	449	*64	513	27	..	27		
1905	53	*34	87	8	1	9		
1906	27	*6	33	..	..	..	15·7	0·00
1907	2	*13	15	..	1	1		
1908	1	*3	4	..	..	..
1909	15	*13	28	2	..	2	15·7	0·00
1910	5	*5	10	..	..	..
1911	70	*21	91	11	..	11		
Totals	72,781	2,443	75,224	11,929	70	11,999	..	..

* Most of these patients were detained for observation at South Wharf.

The following table is founded on the returns of the Registrar-General, and will be of interest in relation to the history of smallpox in the Metropolis:—

YEARS.	Estimated population in the middle of each year.	DEATHS FROM SMALLPOX.		
		Annual total.	Annual rate per million of population.	Rate per million on averages of five years.
1838	1,766,169	3,817	2,161	—
1839	1,802,751	634	352	—
1840	1,840,091	1,235	671	—
1841	1,878,205	1,053	561	—
1842	1,917,108	360	188	771
1843	1,954,041	438	225	396
1844	2,033,816	1,804	890	508
1845	2,073,298	909	440	463
1846	2,113,535	257	122	373
1847	2,202,673	955	427	420
1848	2,244,837	1,620	724	520
1849	2,287,302	521	229	390
1850	2,330,054	499	215	345
1851	2,373,081	1,062	448	407
1852	2,416,367	1,159	478	417
1853	2,459,899	211	86	291
1854	2,503,662	694	277	300
1855	2,547,639	1,039	408	339
1856	2,591,815	531	204	290
1857	2,636,174	156	59	207
1858	2,680,700	242	90	205
1859	2,725,374	1,158	425	237
1860	2,770,181	898	323	223
1861	2,815,101	217	77	196
1862	2,860,117	366	128	208
1863	2,905,210	1,996	687	329
1864	2,950,361	547	185	281
1865	2,995,551	640	214	259
1866	3,040,761	1,391	457	335
1867	3,085,971	1,345	436	395
1868	3,131,160	597	190	297
1869	3,176,308	275	87	275
1870	3,221,394	973	302	293
1871	3,267,251	7,912	2,422	699
1872	3,319,736	1,786	537	716
1873	3,373,065	113	34	676
1874	3,427,250	57	17	653
1875	3,482,306	46	13	588
1876	3,538,246	736	207	160
1877	3,595,085	2,551	710	201
1878	3,652,837	1,417	388	272
1879	3,711,517	450	121	289
1880	3,771,139	471	125	308
1881	3,824,980	2,367	619	391
1882	3,862,956	430	111	273
1883	3,901,309	136	35	202
1884	3,940,042	1,236	313	240
1885	3,979,160	1,317	332	282
1886	4,018,666	20	5	159
1887	4,058,565	9	2	137
1888	4,098,860	9	2	131
1889	4,139,555	1	0	68
1890	4,180,654	3	1	2
1891	4,223,720	8	2	1.4
1892	4,269,634	29	7	3
1893	4,312,263	186	43	11
1894	4,351,501	89	21	15
1895	4,387,248	55	13	17
1896	4,419,411	9	2	17
1897	4,447,907	16	4	17
1898	4,472,664	1	0	8
1899	4,493,617	3	1	4
1900	4,510,711	4	1	1.6
1901	4,544,983	229	51	11
1902	4,579,110	1,314	282	67
1903	4,613,812	13	3	68
1904	4,648,950	25	5	68
1905	4,684,794	10	2	69
1906	4,721,217	—	—	58
1907	4,758,218	—	—	2
1908	4,795,757	—	—	1.4
1909	4,833,938	2	0	0.4
1910	4,872,702	—	—	0.0
1911	4,521,301	9	2	0.4

From the year 1838 up to the epidemic years 1884-5 the Metropolis was never free from smallpox. Since 1885 all smallpox cases have been removed for treatment to hospitals in isolated positions outside London, with the result that during the succeeding 26 years only once has the disease become seriously prevalent.

Staff illness. On p. 140A is a summary of the returns submitted by the medical superintendents of the several hospitals, showing the total numbers of members of the staff who were warded on account of illness.

There were 4,164 (3,806)* persons employed at the fever hospitals during the course of the year, 129 (54) or 3·1 (1·4) per cent. fell ill with fever or diphtheria, and 0 (2) died; while 1,263 (870) or 30·3 (22·9) per cent. suffered from other forms of illness, and 5 (0) died.

II.—IMBECILITY.

**Accommo-
dation for
imbecile
patients.**

(1.) The following table gives particulars of the accommodation for imbecile patients which the Managers now possess :—

INSTITUTION.	Males.	Females.	Total.
Tooting Bec Asylum	486	576	1,062
„ „ Receiving Home for Children	28	24	52
Leavesden Asylum	980	1,184	2,164
Caterham „	972	1,137	2,109
Darenth „	1,104	1,004	2,108
Totals	3,570	3,925	7,495

**Annual
report.**

The annual reports of the medical superintendents of the asylums will be found on pp. 185-200.

* Italic figures in brackets throughout are the corresponding figures for 1910.

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TABLE XX.—Staff illness in infectious hospitals during the year 1911.

DISEASE.	OFFICERS.	Number of cases remain- ing in hospital at beginning of year.	FRESH CASES OCCURRING DURING THE YEAR. (Deaths during the year given in brackets.)											NUMBER OF CASES REMAINING IN HOSPITAL AT END OF YEAR.											NUMBER OF DAYS WARDERD IN 1911.														
			Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Brook.	Northern.	Southern.	Joyce Green Hospital and River Ambu- lance Service.	Totals.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Brook.	Northern.	Southern.	Joyce Green Hospital and River Ambu- lance Service.	Totals.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Brook.	Northern.	Southern.	Joyce Green Hospital and River Ambu- lance Service.	Totals.	
Scarlet fever	Sisters	1	1	2	1	2	65	45	..	106	54	99	
	Staff nurses .. .. .	..	2	1	..	3	1	..	..	..	..	..	8	..	..	1	1	..	..	..	..	..	..	..	..	2	44	33	..	54	..	61	..	..	..	..	309
	Probationers	6	3	8	3	7	3	5	6	12	6	..	53	1	..	2	..	1	2	2	3	1	..	..	12	58	345	117	342	160	359	322	396	236	18	..	2,353
	Nurse attendants	1	..	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	112	
	Wardmaids	3	2	1	1	..	2	6	1	1	47	..	86	58	..	17	42	72	18	..	340	
	Laundrymaids .. .. .	..	..	1	..	..	1	..	..	..	1	..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	50	..	..	..	40	..	142	
	Kitchenmaid	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	47	
Diphtheria	Porters	1	1	2	..	1	1	56	45	101	
	Assistant medical officer .. .. .	..	..	1	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	51
	Sisters	1	..	..	1	..	..	..	1	1	1	..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	11	..	50	21	26	..	..	..	108
	Staff nurses .. .. .	..	..	1	1	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	40	36	..	..	..	..	..	..	70	
	Probationers	1	..	6	3	1	..	4	5	6	3	..	28	..	2	..	..	..	1	..	..	..	..	..	..	3	..	377	114	70	..	279	157	237	101	..	1,335
	Wardmaids .. .. .	..	1	2	1	..	..	3	..	3	..	..	10	..	1	..	..	..	2	..	1	..	..	..	..	4	39	116	26	..	83	..	183	..	..	..	447
	Laundrymaid .. .. .	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	44	..	..	..	..	44	
Enteric fever	Ambulance superintendent .. .. .	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	24	..	..	..	24
	Porters	1	1	..	..	..	..	..	..	1	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	32	..	..	..	..	38	..	..	..	70	
	Sisters .. .. .	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	214	
Scarlet fever and Diphtheria ..	Staff nurses .. .. .	..	1	1	..	..	..	..	..	..	..	2	..	1	1	..	..	..	..	..	..	..	..	..	2	..	26	26	35	..	..	..	..	..	..	..	61
	Probationers	3	..	1	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	1	..	..	74	125	..	..	..	..	..	..	225	
	Probationer .. .. .	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	47	..	..	..	..	47
Totals (fever) ..		17	7	21	13	13	6	16	12	26	13	2	..	129	1	5	5	1	1	5	2	4	2	26	220	1,091	701	740	322	932	517	993	494	195	..	6,205	
Other diseases	Medical superintendent .. .. .	..	..	1	..	..	..	..	..	..	..	1	2	..	..	..	..	..	..	..	..	..	..	1	1	..	5	..	..	..	..	..	..	..	90	95	
	Assistant medical officers .. .. .	..	..	2	..	1	1	..	..	1	..	..	5	..	..	..	1	..	..	..	..	..	..	..	1	..	..	22	..	15	21	..	..	5	..	..	63
	Matrons .. .. .	..	..	1	..	..	..	1	..	1	..	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	14	..	..	..	5	..	2	..	..	33
	Housekeepers .. .. .	..	..	..	..	1	1	..	..	..	..	..	2	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	52	11	..	..	..	..	63
	Night superintendent nurses .. .. .	..	..	..	..	1	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	18	
	Sisters	2	9	12	3	(1)13	8	(1)10	6	7	6	10	5	(2)89	149	154	31	199	115	177	43	90	52	123	47	1,180
	Staff nurses .. .. .	..	12	21	10	34	7	9	..	..	..	..	3	96	..	1	..	..	..	..	..	..	..	..	..	1	213	311	65	472	131	180	..	..	35	1,407	
	Probationers	11	29	37	(1)23	48	40	64	(1)58	49	31	36	7</																										

TABLE A.—Table showing the number of male and female imbeciles admitted, transferred, discharged and died at the Board's several asylums during the year 1911, according to the parishes and unions, also the number remaining under treatment at the end of the year.

PARISHES & UNIONS.	No. remaining at asylum on 1st January, 1911.			Admitted.			Died.			Discharged.			Transferred to other asylums of the Board.			No. remaining at asylum on 31st December, 1911		
				Direct and indirect.														
	M.	F.	Total.	M.	F.	Total.												
Kensington ..	97	81	178	15	13	28	7	9	16	5	4	9	1	3	4	106	87	193
Hammersmith ..	48	49	97	11	13	24	3	4	7	4	8	12	1	2	3	54	52	106
Fulham ..	64	43	107	7	6	13	5	3	8	8	2	10	(¹)	1	1	63	46	109
Paddington ..	69	56	125	7	8	15	2	6	8	4	3	7	..	..	..	72	61	133
Chelsea ..	36	62	98	8	7	15	1	4	5	4	7	11	1	..	1	39	62	101
St. George's, W.	91	83	174	10	10	20	7	9	16	8	6	14	(¹)	2	9	90	87	177
Westminster ..	33	31	64	2	(¹)	2	..	..	..	2	2	4	1	..	..	32	30	62
St. Marylebone ..	86	89	175	14	9	23	7	1	..	2	6	8	1	3	4	97	89	186
St. Pancras ..	302	364	666	50	73	123	18	45	63	40	37	77	(³)	9	12	300	395	695
Hampstead ..	27	34	61	5	(¹)	10	1	2	3	4	3	7	1	1	2	27	36	63
Islington ..	142	162	304	(²) 36	26	62	14	18	32	18	11	29	(¹)	3	4	158	176	334
Hackney ..	140	169	309	(²) 24	31	55	7	13	20	16	25	41	1	5	6	149	169	318
Bloomsbury ..	43	41	84	10	10	20	..	6	6	11	2	13	2	2	4	40	47	87
Strand ..	29	33	62	1	5	6	..	5	5	5	3	8	1	1	2	24	34	58
Holborn ..	151	165	316	(²) 14	8	22	4	5	9	12	14	26	(²)	2	3	151	156	307
London, City of ..	96	71	167	11	5	16	2	5	7	3	5	8	3	1	4	70	101	171
Shoreditch ..	126	110	236	7	(¹) 3	10	2	2	4	7	15	22	2	2	4	124	98	222
Bethnal Green ..	93	95	188	15	11	26	10	8	18	4	6	10	(¹)	1	1	104	98	202
Whitechapel ..	134	107	241	20	13	33	14	11	25	11	9	20	(¹)	2	3	140	110	250
St. George's, E.	57	61	118	9	5	14	6	4	10	1	4	5	2	2	2	63	63	126
Stepney ..	54	55	109	18	7	25	6	5	11	6	4	10	(²)	3	1	64	57	121
Mile End ..	91	86	177	(³) 11	27	38	8	14	22	4	13	17	(¹)	1	4	97	99	196
Poplar ..	153	190	343	41	36	77	12	19	31	21	21	42	(¹)	4	8	169	201	370
Southwark ..	203	202	405	(²) 31	(³) 19	50	4	7	11	20	31	51	(¹)	4	6	212	188	400
Bermondsey ..	158	155	313	(¹) 17	16	33	8	10	18	13	18	31	(²)	2	4	160	149	309
Lambeth ..	252	286	538	33	57	90	12	18	30	27	40	67	(²)	5	11	250	301	551
Wandsworth ..	202	221	423	(²) 31	31	62	21	27	48	19	20	39	(¹)	4	6	212	226	438
Camberwell ..	202	263	465	35	37	72	13	24	37	23	26	49	(¹)	4	5	209	269	478
Greenwich ..	134	124	258	(¹) 10	11	21	6	8	14	7	8	15	5	2	7	133	125	258
Woolwich ..	71	77	148	16	3	19	5	3	8	9	5	14	1	2	3	77	73	150
Lewisham ..	46	47	93	8	6	14	3	7	10	3	4	7	..	1	1	51	48	99
Totals ..	3,430	3,612	7,042	527	511	1,038	208	302	510	321	362	683	68	59	127	3,568	3,702	7,270

NOTE.—The small figures in brackets represent alterations in chargeability after admission.

Asylum statistics. The annual statistical tables for each asylum are printed on pp. 202-9, having been drawn to correspond as far as practicable with the series of tables adopted by the Medico-Psychological Association of Great Britain and Ireland in 1906, and approved by the Commissioners in Lunacy.

The tables are divided into five groups.

Group A. shows the movement of the population of the asylums during the year.

Group B. gives particulars of the admissions ;

Group C. of the discharges ;

Group D. of the deaths ; and

Group E. of the patients remaining in the asylums at the end of the year.

The following tables summarise the statistics of the Board's asylums as a whole. They are not mere arithmetical additions of all the tables, because, with few exceptions, all the patients admitted direct from the parishes and unions or indirectly through asylums not under the Board, are, in the first instance, received at Tooting Bec Asylum or Receiving Home, and are subsequently transferred to the Board's country asylums. Therefore, to include in certain of the summaries the patients admitted to the last-mentioned asylums would be to count the same patients several times over.

TABLE A1—*Showing the movement of the asylums' population during the year 1911.*

	M.	F.	Total.	M.	F.	Total.
In the asylums, January 1st, 1911 ..				3,430	3,612	7,042
Total cases admitted during the year :						
Direct cases	357	429	786			
Indirect ,,	170	82	252			
				527	511	1,038
Total cases under treatment during the year				3,957	4,123	8,080
Discharged or transferred* during the year as—						
Not insane .. .. .	..	..	..
Recovered	8	..	8			
Relieved	4	6	10			
Not improved	56	53	109			
Died	321	362	683			
Total cases discharged, transferred and died during the year				389	421	810
Remaining in the asylums, December 31st, 1911				3,568	3,702	7,270
Average number resident during the year				3,474	3,674	7,148

* Exclusive of transfers between the Board's own asylums.

The "direct" admissions were 83 and the "indirect" 42 more than in 1910; also the total discharges exceeded those of that year by 6 and the deaths by 89.

TABLE B1.—*Analysis of the admissions during the year 1911.*

SUMMARY.

CLASSES OF ADMISSIONS.	CONGENITAL.			ACQUIRED.									TOTAL.		
				First attack.			Not first attack.			Unknown whether first attack or not.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Direct	168	160	328	179	260	439	5	2	7	5	7	12	357	429	786
Indirect	33	8	41	114	67	181	18	6	24	5	1	6	170	82	252
Statutory re-admissions ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total admissions ..	201	168	369	293	327	620	23	8	31	10	8	18	527	511	1038

Of the 1038 total admissions 369 were congenital cases. Of the remaining cases 620 were admitted when suffering from the first attack, in 31 cases it was not the first attack, and in 18 cases it was unknown whether the attack was the first or not.

TABLE B2.—*Showing the duration of the present attack of mental disorder on admission in the admissions during the year 1911, and stating (in those not congenital) whether first attack or not.*

SUMMARY.

Duration of mental disorder prior to admission.	DIRECT ADMISSIONS.											
	First attack.			Not first attack.			Unknown whether first attack or not.			Total.		
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
Less than two weeks	3	..	3	..	..	..	..	..	..	3	..	3
2 weeks and less than 1 month ..	3	2	5	..	..	..	..	..	..	3	2	5
1 month 3 months	17	23	40	2	1	3	..	1	1	19	25	44
3 months 6 ..	23	22	45	2	..	2	..	..	..	25	22	47
6 9 ..	25	29	54	..	..	..	..	..	..	25	29	54
9 12 ..	10	6	16	..	..	..	..	..	..	10	6	16
12 18 ..	28	42	70	..	..	..	..	..	..	28	42	70
18 2 years	5	8	13	..	..	..	..	..	..	5	8	13
2 years 3 ..	16	13	29	..	1	1	..	..	..	16	14	30
3 5 ..	21	14	35	..	..	..	..	..	..	21	14	35
5 10 ..	8	5	13	..	..	..	..	..	..	8	5	13
10 15 ..	2	2	4	..	..	..	..	..	..	2	2	4
15 20 ..	1	..	1	..	..	..	..	..	..	1	..	1
20 25 ..	2	1	3	..	..	..	..	..	..	2	1	3
40 45 ..	..	..	..	..	..	..	..	..	..	..	..	..
Duration unknown	15	93	108	1	..	1	5	6	11	21	99	120
Congenital cases .. .. .	..	..	..	..	..	..	..	..	..	168	160	328
Totals	179	260	439	5	2	7	5	7	12	357	429	786

Of the direct cases admitted at the first attack the duration previous to admission, of the mental disorders from which they suffered, was unknown in 108 cases, in 70 it was known to be between 12 and 18 months, in 29 between 2 and 3 years, in 35 between 3 and 5 years, in 13 cases between 5 and 10 years and in 8 cases between 10 and 25 years, before admission.

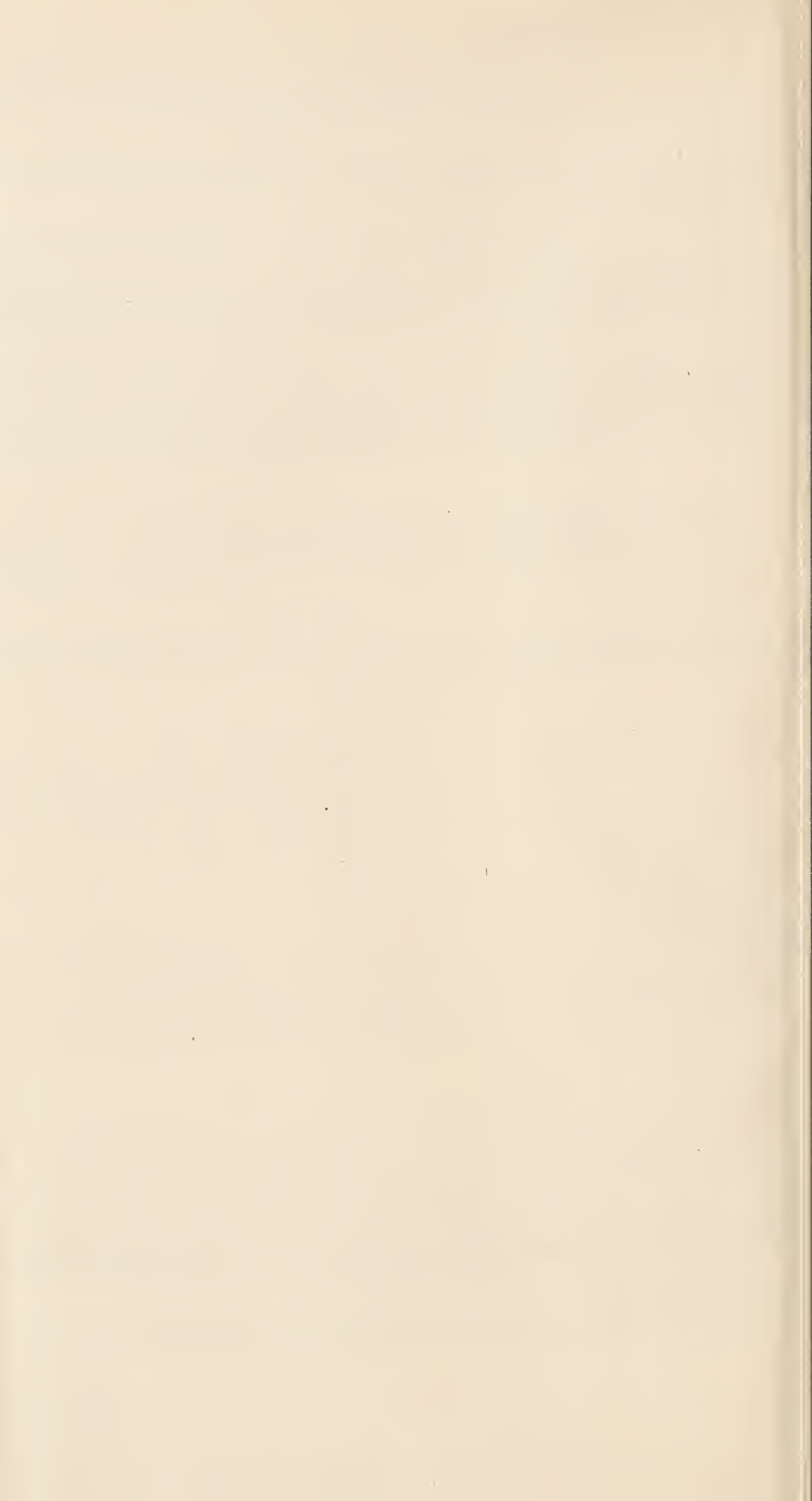


TABLE B5.—*Showing the form of mental disorder on admission in the admissions during the year 1911.*

SUMMARY.

Forms of mental disorder.		DIRECT ADMISSIONS.			INDIRECT ADMISSIONS.			TOTALS.		
		M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
Congenital or infantile mental deficiency (idiocy or imbecility) occurring as early in life as it can be observed.	(1). Intellectual { With epilepsy Without epilepsy	32 136	30 130	62 266	11 22	1 7	12 29	43 158	31 137	74 295
	(2). Moral	...	...	...	...	...	...	...	...	...
Insanity occurring later in life.	(1). Insanity with epilepsy	8	10	18	5	2	7	13	12	25
	(2). General paralysis of insane	11	4	15	1	...	1	12	4	16
	(3). Insanity with grosser brain lesions	7	8	15	...	...	...	7	8	15
	(4). Acute delirium	...	...	...	...	...	...	...	...	...
	(5). Confusional insanity	...	...	...	...	1	1	...	1	1
	(6). Stupor	...	...	...	2	...	2	2	...	2
	(7). Primary dementia	4	35	39	13	1	14	17	36	53
	(8). Mania { (a). Recent (b). Chronic (c). Recurrent	...	...	...	...	...	...	...	...	...
		6	...	6	12	5	17	18	5	23
	
	(9). Melancholia { (a). Recent (b). Chronic (c). Recurrent	1	...	1	...	...	...	1	...	1
		13	3	16	9	2	11	22	5	27
	
	(10). Alternating insanity	1	...	1	...	...	...	1	...	1
	(11). Delusional { (a). Systematised insanity { (b). Non- Systematised	3	...	3	...	...	...	3	...	3
		6	1	7	8	1	9	14	2	16
	(12). Volitional { (a). Impulse insanity { (b). Obsession (c). Doubt	...	...	...	...	...	...	...	...	...
	
	(13). Moral insanity	...	...	...	...	...	...	...	...	...
	(14). Dementia { Senile Secondary	116 13	208 ...	324 13	21 66	8 54	29 120	137 79	216 54	353 133
Total		357	429	786	170	82	252	527	511	1038

Of the 369 Congenital cases, the mental deficiency of 74 cases was complicated with epilepsy. Of the 669 cases in which insanity occurred later in life 486 or 72·6 per cent. suffered from senile dementia.

TABLE B6.—Showing the occupations of the direct admissions, excluding the congenital cases, during the year 1911, distinguishing between first-attack cases, not-first-attack cases, and cases unknown-whether-first-attack-or-not; and, in respect of the first-attack cases, arranged according to the age at commencement of the mental disorder.

SUMMARY.

SYMBOL.			OCCUPATION.	FIRST ATTACK CASES.												NOT-FIRST-ATTACK CASES.			UNKNOWN-WHETHER-FIRST-ATTACK-OR-NOT.			TOTAL DIRECT ADMISSIONS. EXCLUDING CONGENITAL CASES.				
Group.	Sub-group.	Sub-division.		Age at commencement of the mental disorder.											Total.											
				Under 10.	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65-74	75 and upwards	Not known.												
TOOTING BEC ASYLUM.															M	F	T	M	F	T	M	F	T	M	F	T
C	e	1	Author ..	..	..	..	..	..	..	..	..	2	..	2	1	1	..	..	..	..	..	..	1	..	1	
C	g	6	Artist ...	..	..	..	..	..	..	..	..	2	..	2	1	4	1	5	..	..	..	..	..	4	1	5
K	c	5	Blacksmith ..	..	..	..	..	..	1	..	..	..	3	..	..	4	..	4	..	..	..	..	..	4	..	4
K	c	6	Brass turner ..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	1	..	..	..	..	..	1	..	1
K	c	10	Boilermaker ..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	1	..	..	..	..	..	1	..	1
M	a	4	Bricklayer ..	..	..	..	..	..	..	..	..	..	3	..	..	3	..	3	..	..	..	..	..	3	..	3
N	a	7	Basketmaker ..	..	..	..	..	1	..	..	..	1	..	..	..	2	..	2	..	..	..	..	..	2	..	2
T	a	15	Bootmaker ..	..	..	..	..	..	..	..	..	..	4	1	..	5	..	5	..	..	..	..	..	5	..	5
V	a	6	Butcher ..	..	..	..	..	..	..	..	..	2	..	1	..	3	..	3	..	..	..	..	..	3	..	3
V	a	11	Baker ...	..	..	..	..	..	..	..	..	2	1	..	1	4	..	4	..	..	..	..	..	4	..	4
C	h	1	Cinema. operator ..	..	..	..	..	1	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	1	..	1
D	a	2	Cook ...	..	..	..	..	..	..	..	..	3	2	..	..	..	5	5	..	..	..	..	..	..	5	5
D	c	3	Caretaker ..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	1	..	..	..	..	..	..	1	1
E	a	4	Canvasser ..	..	..	..	..	..	..	1	..	..	..	..	1	2	..	2	..	..	..	..	..	2	..	2
E	b	1	Clerk ...	..	..	..	..	..	1	..	..	2	1	1	2	4	1	5	1	..	1	..	..	5	1	6
F	b	2	Cabdriver ..	..	..	..	1	..	..	1	..	..	1	..	..	5	..	5	..	..	..	..	..	5	..	5
F	b	3	Carman ..	..	..	..	..	..	..	1	..	2	1	1	..	5	..	5	..	..	..	..	..	5	..	5
M	a	3	Carpenter ..	..	..	..	..	..	1	..	..	1	3	..	..	5	..	5	..	..	..	..	..	5	..	5
N	a	1	Cabinetmaker ..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	1	..	..	..	..	..	1	..	1
N	b	5	Cooper...	..	..	..	..	..	..	..	..	..	1	..	..	2	..	2	..	..	..	..	..	2	..	2
N	b	7	Chair caner ..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	1	..	..	..	..	..	..	1	1
S	e	5	Carpet sewer ..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	1	..	..	..	..	..	..	1	1
S	c	5	Charwoman ..	..	..	..	..	..	..	..	..	3	3	3	6	..	15	15	..	..	..	..	..	15	..	15
V	d	1	Cigarmaker ..	..	..	..	..	..	..	..	..	1	..	..	..	..	1	1	..	..	..	..	..	..	1	1
F	d	1	Dock labourer ..	..	..	..	..	..	3	..	..	2	1	..	..	6	..	6	..	..	..	..	..	6	..	6
S	g	1	Draper ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	1	..	1	1
T	a	9	Dressmaker ..	..	..	..	..	..	1	..	..	..	2	1	..	..	4	4	..	..	..	1	1	..	5	5
C	b	1	Engineer ..	..	..	..	..	..	..	..	..	1	1	..	..	2	..	2	..	..	..	..	..	2	..	2
L	b	3	Electrician ..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	1	..	..	..	..	..	1	..	1
M	b	5	Excavator ..	..	..	..	..	..	..	..	..	..	..	1	..	1	..	1	..	..	..	..	..	1	..	1
G	a	7	Farm servant ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	..	1	..	1
M	b	7	Firewood cutter ..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	1	..	..	..	..	..	1	..	1
N	a	9	Furniture dealer ..	..	..	..	..	..	..	..	..	..	1	..	..	1	..	1	..	..	..	..	..	1	..	1
N	a	8	Fishmonger ..	..	..	..	..	..	..	..	..	..	..	..	1	1	..	1	..	..	..	..	..	1	..	1
V	a	19	Florist ..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	1	..	..	..	..	..	1	..	1
V	a	14	Factory hand ..	..	..	..	..	..	..	..	1	..	..	..	..	..	1	1	..	..	..	..	..	..	1	1
D	b	2	Gardener ..	..	..	..	..	..	..	..	..	2	..	..	..	2	..	2	..	..	..	..	..	2	..	2
N	a	6	Gilder ...	..	..	..	..	..	..	1	..	..	1	..	..	1	..	1	..	..	..	..	..	1	..	1
M	a	14	Gasfitter ..	..	..	..	..	..	..	..	..	1	1	..	..	2	..	2	..	..	..	..	..	2	..	2
Q	b	11	Harnessmaker ..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	1	..	..	..	..	..	1	..	1
T	a	4	Hatmaker ..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	1	..	..	..	..	..	1	..	1
X	c	3	Hawker ..	..	..	..	..	1	1	1	1	4	2	2	3	7	4	11	..	..	..	..	..	7	4	11
D	c	6	Laundress ..	..	..	..	..	..	..	..	..	1	2	2	3	..	8	8	..	..	1	1	..	9	..	9
F	c	2	Lighterman ..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	1	..	..	..	..	..	1	..	1
S	e	2	Laceworker ..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	1	..	..	..	..	..	..	1	1
X	d	1	Labourer ..	..	..	..	1	..	..	1	6	5	2	1	16	..	16	1	..	1	..	..	..	17	..	17
B	b	1	Master mariner ..	..	..	..	..	..	..	1	..	..	..	..	..	1	..	1	..	..	..	..	..	1	..	1
X	d	5	Machinist ..	..	..	..	..	..	..	1	..	..	..	..	..	1	..	1	..	..	..	..	..	1	..	1
C	c	4	Nurse ...	..	..	..	..	..	..	..	..	..	2	3	1	..	6	6	1	..	1	..	..	6	7	1
R	b	5	Newsvendor ..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	1	..	..	..	..	..	..	1	1</

TABLE B7.—ÆTIOLOGICAL.—Showing the ætiological factors and associated conditions assigned in the direct admissions during the year 1911, distinguishing between cases—congenital, first-attack, not-first-attack, and unknown-whether-first-attack-or-not.

SUMMARY.

ÆTIOLOGICAL FACTORS AND ASSOCIATED CONDITIONS.	CONGENITAL CASES.			FIRST-ATTACK CASES.			NOT-FIRST-ATTACK CASES.			CASES UNKNOWN-WHETHER-FIRST-ATTACK-OR-NOT.			TOTAL DIRECT ADMISSIONS.		
	PRINCIPAL.	CONTRIBUTORY.	TOTAL INCIDENCE.	PRINCIPAL.	CONTRIBUTORY.	TOTAL INCIDENCE.	PRINCIPAL.	CONTRIBUTORY.	TOTAL INCIDENCE.	PRINCIPAL.	CONTRIBUTORY.	TOTAL INCIDENCE.	TOTAL PRINCIPAL.	TOTAL CONTRIBUTORY.	GRAND TOTAL INCIDENCE.
	Instances where regarded as the essential or chief factor.	Instances where regarded as a contributory factor or associated condition.		Instances where regarded as the essential or chief factor.	Instances where regarded as a contributory factor or associated condition.		Instances where regarded as the essential or chief factor.	Instances where regarded as a contributory factor or associated condition.		Instances where regarded as the essential or chief factor.	Instances where regarded as a contributory factor or associated condition.		Total instances where regarded as the essential or chief factor.	Total instances where regarded as a contributory factor or associated condition.	
	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.
A. HEREDITY (<i>excluding cousins, nephews, nieces and offspring</i>).															
1. Insane	26	11	37	..	..	..	26	11	37	15	2	17	41	13	54
2. Epileptic	3	..	3	..	..	..	3	..	3	1	..	1	4	..	4
3. Neurotic (<i>including only hysteria, neurasthenia, spasmodic (idiopathic) asthma and chorea</i>) .. .. .	..	..	..	..	1	1	..	1	1	..	..	..	..	1	1
4. Eccentricity (<i>in marked degree</i>) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Alcoholism .. .. .	..	..	..	1	1	2	1	1	2	..	..	..	..	3	4
B. MENTAL INSTABILITY, as revealed by—															
1. Moral deficiency .. .. .	..	..	..	..	1	1	..	1	1	3	..	3	3	2	6
2. Congenital mental defect, not amounting to imbecility .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1
3. Eccentricity .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
C. DEPRIVATION OF SPECIAL SENSE.															
1. Smell or taste .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Hearing .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	2	2
3. Sight .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
D. CRITICAL PERIODS.															
1. Puberty and adolescence .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Climacteric .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Senility .. .. .	..	..	..	..	..	..	112	203	315	10	6	16	122	209	331
E. CHILD-BEARING.															
1. Pregnancy .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Puerperal state (<i>not septic</i>) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Lactation .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
F. MENTAL STRESS.															
1. Sudden .. .. .	..	..	..	..	..	..	..	2	2	2	2	4	6	2	6
2. Prolonged .. .. .	..	..	..	..	1	1	..	6	6	6	6	12	18	6	19
G. PHYSIOLOGICAL DEFECTS AND ERRORS.															
1. Malnutrition in early life (<i>signs of rickets, etc.</i>) .. .. .	..	..	..	1	..	1	..	..	..	1	..	1	..	2	2
2. Privation and starvation .. .. .	..	..	..	..	..	..	..	1	1	..	..	..	1	1	2
3. Over-exertion (<i>physical</i>) .. .. .	..	..	..	..	..	..	..	..	..	1	..	1	..	..	1
4. Masturbation .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Sexual excess .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
H. TOXIC.															
1. Alcohol .. .. .	..	1	1	..	..	..	..	1	1	..	1	1	..	5	25
2. Drug habit (<i>morphia, cocaine, etc.</i>) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Lead and other such poisons .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
4. Tuberculosis .. .. .	..	..	..	..	..	..	..	5	5	..	..	..	..	..	..
5. Influenza .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	5	5
6. Puerperal sepsis .. .. .	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..
7. Other specific fevers .. .. .	..	..	..	..	..	..	..	1	1	..	1	1	..	3	3
8. Syphilis, acquired .. .. .	..	..	..	..	..	..	..	9	9	..	..	..	8	9	17
9. Syphilis, congenital	3	3	..	3	3	2	..	..	2	..	..	..	5	..	5
10. Other toxins .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
I. TRAUMATIC.															
1. Injuries .. .. .	..	1	1	2	2	4	2	3	5	5	..	5	5	1	12
2. Operations .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Sunstroke .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
K. DISEASES OF THE NERVOUS SYSTEM.															
1. Lesions of brain .. .. .	..	..	..	1	..	1	4	6	10	1	4	5	4	6	16
2. Lesions of spinal cord and nerves .. .. .	..	..	..	..	..	..	1	..	1	1	..	1	1	3	4
3. Epilepsy .. .. .	..	1	1	5	6	11	5	7	12	9	4	13	14	10	32
4. Other defined neuroses (<i>limited to hysteria, neurasthenia, spasmodic asthma, and chorea</i>) .. .. .	..	..	..	..	..	..	4	..	4	4	..	4	..	4	4
5. Other neuroses which occurred in infancy or childhood (<i>limited to convulsions and night-terrors</i>) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
L. OTHER BODILY AFFECTIONS.															
1. Hæmopoietic system (<i>anæmia, etc.</i>) .. .. .	..	..	..	..	..	..	2	..	2	96	43	139	98	43	141
2. Cardio-vascular degeneration .. .. .	..	..	..	..	..	..	1	..	1	..	..	..	1	..	1
3. Valvular heart disease .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
4. Respiratory system (<i>excluding tuberculosis</i>) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Gastro-intestinal system .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
6. Renal and vesical system .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
7. Generative system (<i>excluding syphilis</i>) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
8. Other general affections, not included above (<i>e.g., diabetes, myxœdema, etc.</i>) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
M. CASES IN WHICH NO PRINCIPAL FACTOR COULD WITH CERTAINTY BE ASSIGNED, but in which one or more factors were ascertained, and were returned as contributory	4	3	7	..	..	..	1	4	5	..	..	..	6	7	13
N. NONE ASSIGNABLE, notwithstanding full history and observation	31	50	81	..	..	..	8	5	13	..	..	..	39	55	94
O. NONE ASCERTAINED, history defective	100 ¹	93	193 ¹	..	..	..	11	22	33	..	..	..	114 ¹	119	233 ¹
Totals	167 ¹	160	327 ¹	Total congenital cases.	179	260	439	Total first-attack cases.	5	2	7	Total not-first-attack cases.	5	7	12
													Total cases unknown-whether-first-attack-or-not.	356 ¹	429 785 ¹
														Total direct admissions.	

* One entry, and one only, has been made in these columns for each case recorded in them; thus the totals of these columns will equal the number of cases belonging to that particular class.

† As several factors will have sometimes been entered in these columns in respect of one case, and, on the other hand, there may have been none to enter, no attempt should be made to totalise these columns.

‡ All cases believed to have suffered, at any time in their lives, from syphilis have been entered.

Small figure denotes 1 direct admission to Darenth Asylum.

Amongst the ætiological factors and associated conditions assigned in the congenital cases directly admitted, insanity of near relatives is recorded as a principal factor in 40 instances and alcoholism in 1. In 81 cases no principal or contributory factor or associated condition could be assigned notwithstanding that the full histories of the patients had been obtained and they had been under observation. In 193 cases no causes could be assigned owing to the histories of the patients being defective. Amongst the non-congenital cases senility was assigned as a principal factor in 322 cases and contributory in 17; mental stress as principal in 8 and contributory in 17; alcoholism as principal in 9 and contributory in 15; syphilis as principal in 8 and contributory in 9; traumatic injuries as principal in 5 and contributory in 2; diseases of the nervous system were principal factors in 18 cases and contributory in 25; and cardio-vascular degeneration was a contributory cause in 139 cases.

TABLE B9.—Showing the GENERAL PARALYTICS in the **direct admissions** during the year 1911, arranged according to their ages at commencement of the attack and to their civil state, and also the number of instances in which the attack was ascertained to have been preceded by syphilis, together with the age at which the latter was contracted.

SUMMARY.
TOOTING BEC ASYLUM AND TOOTING BEC RECEIVING HOME FOR CHILDREN.

(The small figures indicate cases at Tooting Bec Receiving Home for Children)

CIVIL STATE.	AGE AT COMMENCEMENT OF THE ATTACK OF GENERAL PARALYSIS.										TOTALS.			With positive evidence of syphilis.					
	Under 15.		15—19.		20—24.		25—34.		35—44.		45—54.		55—64.		65 and upwards.		Unknown.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.		F.	T.	M.	F.	T.
Single ..	1	1	2	2	..	2	1	..	1	1	1	1	1	1	..	1	..	..	3
Married	3	..	1	1	..	..	..	2	2	6	2
Widowed	1	..	1	1	..
Unknown
TOTALS ..	1	1	2	2	..	2	1	..	3	1	4	2	1	..	1	2	3	11	5
SYPHILIS, congenita.
" contr cted prior to age 25
" " 25—34
" " 35—44
" " 45—54
" " at or after age 55
" " at age unknown	2	..	..	..	..	..	1	..	2	2	..	..	..	5	..	5	..

TABLE C1.—*An analysis of the discharges and transfers during the year 1911.*
SUMMARY.

	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.
Discharged as recovered—									
From direct admissions—									
First-attack cases	3	..	3	..	..	..	..	..	..
Not-first-attack cases	1	..	1	..	..	..	..	..	..
Cases unknown-whether-first-attack-or-not .. .. .	..	..	..	..	..	..	..	..	..
Total from direct admissions				4	..	4	..	..	..
From transfers—									
First-attack cases	3	..	3	..	..	..	..	..	..
Not-first-attack cases	1	..	1	..	..	..	..	..	..
Cases unknown-whether-first-attack-or-not .. .. .	..	..	..	..	..	..	..	..	..
Total from transfers .. .. .	..	..	..	4	..	4	..	..	..
Total discharged as recovered .. .. .	..	..	..	8	..	8	..	..	..
Discharged (not recovered) as—				Relieved.			Not improved		
Relieved	4	6	10	4	6	10	..	..	..
Not improved	56	53	109	..	..	..	56	53	109
Total	60	59	119						
Reasons for such discharge—									
To go to care of friends	12	20	32	..	..	..	..	..	..
To go to workhouse	13	13	26	..	..	..	..	..	..
To go to L.C.C. and other asylums	35	26	61	..	..	..	..	..	..
To be boarded out .. .. .	..	..	..	..	..	..	..	..	..
Statutory, by irregularity in reception order .. .. .	..	..	..	..	..	..	..	..	..
Statutory, by lapsing of reception order .. .. .	..	..	..	..	..	..	..	..	..
To fever hospital.. .. .	..	..	..	..	..	..	..	..	..
Total	60	59	119						
Transferred as—									
Relieved .. .. .	..	..	..	..	..	..	..	..	..
Not improved .. .. .	..	..	..	..	..	..	..	..	..
Total									
Destination of such transfers—									
To other asylums, reg. hospitals, and licensed houses .. .. .	..	..	..	..	..	..	..	..	..
To "single care" .. .. .	..	..	..	..	..	..	..	..	..
Other destination .. .. .	..	..	..	..	..	..	..	..	..
Total .. .. .	..	..	..			
Total discharged and transferred as—									
Relieved .. .. .	..	..	..	4	6	10	..	..	..
Not improved .. .. .	..	..	..	..	..	..	56	53	109

8 patients were discharged as recovered, 119 as relieved or not improved. Of the latter number 32 went to the care of friends, 26 to workhouses and 61 to L.C.C. or other asylums not under the Managers' control, the patients having become dangerous to themselves or others.

TABLE C2.—Showing in the total cases discharged recovered during the year 1911 the ages in quinquennial periods—(a) On recovery, and (b) at the commencement of the recent attack of mental disorder, arranged according to the total length of such attack.

SUMMARY.

AGE PERIODS	Less than 10.		10-14.	15-19.	20-24.	25-29.	30-34.	35-39.	40-44.	45-49.	50-54.	55-59.	60-64.	65-69.	70-74.	75-79.	80-84.	85-89.	Age un-known	Total.
	M. F.		M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F. T.
AGE ON RECOVERY	4	1	..	..	..	..	..	1	1	..	..	1	..	..	..	..	8 .. 8
AGE AT COMMENCEMENT OF RECENT ATTACK OF MENTAL DISORDER.																				
Total length of this attack of mental disorder.																				
Less than 1 month
1 month and less than 3 months
3 months
6 "
9 "
12 "
18 "	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1 ..
2 years	1	..	..	..	..	..	..	..	1 ..
3 "	1	..	..	..	..	1 ..
5 "	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1 ..
10 "	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1 ..
Duration unknown	2	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	3 ..
Totals	4	1	..	..	..	..	..	1	1	..	..	1	..	..	..	..	8 .. 8

TABLE C3.—*Showing the form of mental disorder, on admission, in those discharged recovered during 1911.*

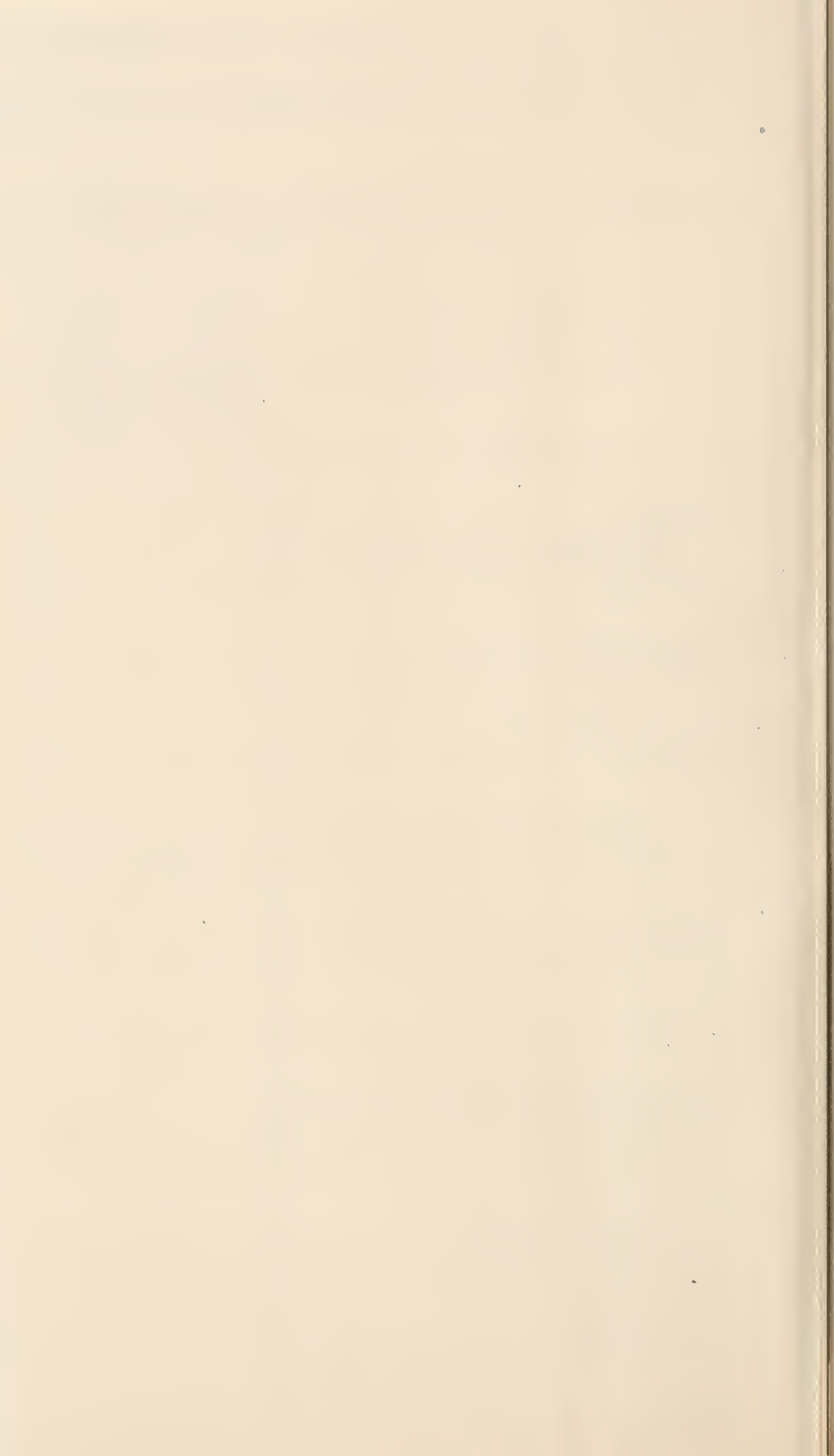
SUMMARY.

FORMS OF MENTAL DISORDER (ON ADMISSION).										M.	F.	Total.
Primary dementia	...	...	...	...	...	...	...	3	...	3
Senile dementia	...	...	...	...	...	...	...	1	...	1
Chronic melancholia	...	...	...	...	...	...	...	2	...	2
Confusional insanity	...	...	...	...	...	...	...	1	...	1
Mania	...	...	...	...	...	...	...	1	...	1
Totals										8

TABLE C4.—Showing the ætiological factors ascertained in the recoveries during the year 1911, distinguishing between cases—first-attack, not-first-attack, and unknown-whether-first-attack-or-not.

SUMMARY.													(Figures in small type refer to Caterham Asylum). (Figures in brackets refer to Darenth Asylum).															
TOOTING BEC ASYLUM, CATERHAM ASYLUM AND DARENTH ASYLUM.																												
ÆTIOLOGICAL FACTORS AND ASSOCIATED CONDITIONS.	FIRST-ATTACK CASES.						NOT-FIRST-ATTACK CASES.						CASES UNKNOWN-WHETHER-FIRST- ATTACK-OR-NOT.						TOTAL DIRECT RECOVERIES.									
	PRINCIPAL.			CONTRIBU- TORY.			TOTAL INCIDENCE.	PRINCIPAL.			CONTRIBU- TORY.			TOTAL INCIDENCE.	PRINCIPAL.			CONTRIBU- TORY.			TOTAL INCIDENCE.	TOTAL PRINCIPAL.			TOTAL CON- TRIBUTORY.			GRAND TOTAL INCIDENCE.
	Instances where re- garded as the essential or chief factor. *			Instances where re- garded as a contributory factor or associated condition. †				Instances where re- garded as the essential or chief factor. *			Instances where re- garded as a contributory factor or associated condition. †				Instances where re- garded as the essential or chief factor. *			Instances where re- garded as a contributory factor or associated condition. †				Total instances where re- garded as the essential or chief factor.			Total instances where re- garded as a contributory factor or associated condition.			
	M.	F.	T.	M.	F.	T.		M.	F.	T.	M.	F.	T.		M.	F.	T.	M.	F.	T.		M.	F.	T.	M.	F.	T.		M.	F.	T.
A. HEREDITY (excluding cousins, nephews, nieces and offspring).																												
1. Insane																												
2. Epileptic																												
3. Neurotic (including only hysteria, neurasthenia, spasmodic (idiopathic) asthma and chorea)																												
4. Eccentricity (in marked degree)																												
5. Alcoholism																												
B. MENTAL INSTABILITY, as revealed by—																												
1. Moral deficiency																												
2. Congenital mental defect, not amounting to imbecility																												
3. Eccentricity																												
C. DEPRIVATION OF SPECIAL SENSE.																												
1. Smell or taste																												
2. Hearing																												
3. Sight																												
D. CRITICAL PERIODS.																												
1. Puberty and adolescence																												
2. Climacteric																												
3. Senility																												
E. CHILD-BEARING.																												
1. Pregnancy																												
2. Puerperal state (not septic)																												
3. Lactation																												
F. MENTAL STRESS.																												
1. Sudden																												
2. Prolonged																												
G. PHYSIOLOGICAL DEFECTS AND ERRORS.																												
1. Malnutrition in early life (signs of rickets, etc.)																												
2. Privation and starvation																												
3. Over-exertion (physical)																												
4. Masturbation																												
5. Sexual excess																												
H. TOXIC.																												
1. Alcohol																												
2. Drug habit (morphia, cocaine, etc.)																												
3. Lead and other such poisons																												
4. Tuberculosis																												
5. Influenza																												
6. Puerperal sepsis																												
7. Other specific fevers																												
8. Syphilis, acquired																												
9. Syphilis, congenital																												
10. Other toxins																												
I. TRAUMATIC.																												
1. Injuries																												
2. Operations																												
3. Sunstroke																												
K. DISEASES OF THE NERVOUS SYSTEM.																												
1. Lesions of brain																												
2. Lesions of spinal cord and nerves																												
3. Epilepsy																												
4. Other defined neuroses (limited to hysteria, neuras- thenia, spasmodic asthma, and chorea)																												
5. Other neuroses which occurred in infancy or childhood (limited to convulsions and night-terrors)																												
L. OTHER BODILY AFFECTIONS.																												
1. Hæmopoietic system (anæmia, etc.)																												
2. Cardio-vascular degeneration																												
3. Valvular heart disease																												
4. Respiratory system (excluding tuberculosis)																												
5. Gastro-intestinal system																												
6. Renal and vesical system																												
7. Generative system (excluding syphilis)																												
8. Other general affections, not included above (e.g., diabetes, myxœdema, etc.)																												
M. CASES IN WHICH NO PRINCIPAL FACTOR COULD WITH CERTAINTY BE ASSIGNED, but in which one or more factors were ascertained, and were returned as contributory																												
N. NONE ASSIGNABLE, notwithstanding full history and observation																												
O. NONE ASCERTAINED, history defective																												
Totals																												
Total first-attack cases. Total not-first-attack cases. Total cases unknown-whether-first-attack-or-not. Total direct recoveries.																												

* One entry, and one only, has been made in these columns for each case recorded in them ; thus the totals of these columns will equal the number of cases belonging to that particular class.
† As several factors will have sometimes been entered in these columns in respect of one case, and, on the other hand, there may have been none to enter, no attempt should be made to totalise these columns
‡ All cases believed to have suffered, at any time in their lives, from syphilis have been entered.



SUMMARY.

Amongst 683 patients whose death was assigned to some general disease, 78 suffered from pneumonia, 82 from tuberculosis, 14 from cancer, 80 died from various nervous diseases, including 11 from cerebral softening, 14 from organic disease of the brain, 15 from general paralysis of the insane, and 30 from epilepsy; 36 from various forms of heart disease, 20 from diseases of the respiratory organs, 247 from senile decay and 2 from accident.

SUMMARY.

Of the total 683 deaths, 22 were of patients under 10 years of age and 395 were over 60 years, including 262 over 70 years.

SUMMARY.

[illegible]

TABLE E1.—Showing the ages (in quinquennial periods) of those on the registers on the 31st December, 1911, arranged according to the total duration of present attack of mental disorder.

SUMMARY.

Total duration of present attack of mental disorder.			Ages on 31st December, 1911, of those on registers at that date.																80 and over.			Totals.																		
			Less than 10.		10—14.		15—19.		20—24.		25—29.		30—34.		35—39.		40—44.		45—49.		50—54.		55—59.		60—64.		65—69.		70—74.		75—79.		Un-known							
			M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	T.			
Congenital	..	..	214	146	264	216	372	246	328	271	272	213	238	196	230	216	161	190	119	144	91	108	63	80	45	41	17	31	11	29	3	9	1	6	..	..	2,429*	2,142*	4,571*
Less than 3 months	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	1	..	3	..	4	..	1	..	..	..	..	..	11	..	11
3 months and less than 6 months			1	..	2	1	..	1	..	1	3	1	3	1	..	2	2	3	2	..	2	2	1	15	14	29
6 "	12 "	7	..	2	..	2	1	1	2	1	4	2	2	4	2	4	4	2	5	2	6	5	4	3	2	12	1	6	1	5	43	47	90
12 "	18 "	..	..	..	..	..	..	4	3	1	1	1	1	4	..	1	2	6	1	3	8	2	8	3	5	4	12	3	7	11	7	9	4	7	..	..	60	57	117
18 "	2 years	..	..	..	..	1	..	4	..	4	2	..	1	..	3	3	2	1	1	1	3	..	2	2	5	..	7	4	10	3	5	6	2	3	..	..	48	23	71
2 years	3 "	..	..	..	..	..	..	5	5	6	1	6	1	4	5	6	1	5	1	5	9	8	5	3	9	6	11	11	8	6	6	13	4	14	..	..	75	87	162
3 "	5 "	..	..	1	..	2	..	5	..	5	8	7	7	4	14	9	3	3	4	5	7	8	6	9	13	5	10	16	16	16	8	22	13	30	..	..	117	134	251
5 "	10 "	..	..	..	1	2	3	3	9	12	10	14	4	9	18	11	20	11	9	17	12	18	24	23	23	21	22	31	21	13	28	9	34	..	..	194	238	432	
10 "	20 "	..	..	..	..	1	..	1	..	2	6	14	7	19	16	26	20	22	28	14	22	20	37	16	32	14	27	15	15	9	12	5	19	..	..	178	251	429	
20 "	30 "	..	..	..	..	..	..	..	1	..	..	..	1	1	4	4	13	22	23	34	26	44	19	30	14	39	17	37	8	16	5	21	7	13	..	..	137	262	399
30 "	40 "	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	3	1	13	11	12	19	12	28	8	11	6	26	3	11	2	5	..	..	61	112	173
40 "	50 "	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	2	3	5	6	9	13	2	8	3	6	3	11	..	..	26	47	73	
Duration unknown	..	..	..	..	..	..	..	1	..	..	..	..	5	2	4	9	9	11	11	12	14	11	20	21	34	23	29	38	21	43	16	47	8	69	3	1	174	288	462
Totals	..	..	214	146	265	217	387	250	354	290	304	240	289	225	296	283	232	283	199	249	207	238	181	233	190	214	165	218	141	208	82	191	59	216	3	1	3,568	3,702	7,270

* The figures here should correspond with the total of (a) and (b), congenital cases, in table E2.

Of 7,270 patients remaining in the asylums at the end of the year 1,479 were under 20 years of age (360 being under 10) while 1,684 were over 60 (including 275 over 80).

TABLE E2.—*Showing the form of mental disorder on 31st December, 1911, of those on the registers at that date.*

SUMMARY.

Forms of mental disorder on 31st December.						M.	F.	T.
Congenital or infantile deficiency (idiocy or imbecility) occurring as early in life as it can be observed.	1. Intellectual { a. With epilepsy					560	655	1,215
	b. Without epilepsy					1,869	1,487	3,356
	2. Moral .. .. .					..	..	..
Insanity occurring later in life.	1. Insanity with epilepsy					112	109	221
	2. General paralysis of the insane					22	18	40
	3. Insanity with grosser brain lesions					19	21	40
	4. Acute delirium .. .. .					..	..	..
	5. Confusional insanity					2	..	2
	6. Stupor					3	..	3
	7. Primary dementia					34	53	87
	8. Mania { a. Recent					2	2	4
	b. Chronic					62	143	205
	c. Recurrent .. .. .					..	1	1
	9. Melancholia { a. Recent					2	2	4
	b. Chronic					25	51	76
	c. Recurrent .. .. .					..	..	..
	10. Alternating insanity					4	..	4
	11. Delusional insanity { a. Systematised					22	6	28
	b. Non-systematised					38	27	65
	12. Volitional insanity { a. Impulse .. .. .					..	..	..
b. Obsession .. .. .					..	..	..
c. Doubt .. .. .					..	..	..
13. Moral insanity .. .. .					..	..	..
14. Dementia { a. Senile					257	527	784	
b. Secondary					535	600	1,135	
Totals						3,568	3,702	7,270
Prospect of mental recovery {						2	..	2
					
						3,566	3,702	7,268

The last table shows the form of mental disorder in those patients in the asylums at the end of the year. 4,571 were congenital and 784 senile cases.

III.—CHILDREN'S INSTITUTIONS.

**Sick,
convalescent
and
debilitated
children.**

Queen Mary's Hospital at Carshalton, Surrey, and the Park Hospital for Children, Hither Green, admitted direct from unions and parishes during the year 2,925 (2,204) children, and 205 (181) from other institutions of the Board. Of these 1,936 (1,893) were discharged, 555 (198) were transferred to other institutions of the Board, 192 (85) died, and 1,479 (1,032) remained under treatment at the end of the year. The Homes at Herne Bay, Margate, and Rustington contained 385 (381) children at the beginning of the year; 767 (776) were admitted direct from the unions and parishes, and 325 (166) from other institutions of the Board; 811 (768) were discharged to the unions and parishes, and 138 (164) to other institutions of the Board; 13 (6) died; and 515 (385) remained under treatment at the end of the year.

The reports of the visiting medical officers will be found on pp. 31-40.

**Children
suffering from
contagious
disease of the
skin or scalp.**

At the Ringworm School at Sutton there were 303 (344) children remaining at the beginning of the year; 575 (816) were admitted from the unions and parishes, and 130 (203) from other institutions of the Board; 695 (864) have been discharged to the unions and parishes, and 135 (192) to other institutions of the Board; 1 died (4); and 178 (303) remained under treatment at the close of the year.

The report of the visiting medical officer will be found on p. 40.

**Children
suffering from
ophthalmia
or other
contagious
disease of
the eye.**

There were 612 (551)* children in the Ophthalmia Schools at Swanley and Brentwood at the beginning of the year; 571 (636) were admitted during the year direct from the unions or parishes, and 49 (46) from other institutions of the Board; 493 (551) children were discharged direct to the unions or parishes, and 57 (66) to other institutions of the Board. 2 died (4); and 680 (612) remained under treatment at the end of the year.

The report of the visiting ophthalmic surgeon will be found on page 43.

**Defective
children.**

In the six Homes for Children who, by reason of defect of intellect or physical infirmity, cannot properly be trained in association with children in ordinary schools, there were resident at the beginning of the year 331 (304) children; 83 (56) were admitted from the unions or parishes, and 163 (86) from other institutions of the Board; 28 (19) were discharged to the unions or parishes, and 183 (94) to other institutions of the Board; two died (2); 364 (331) remained under training at the end of the year.

The reports of the medical officers will be found on pp. 46-53.

IV.—TRAINING SHIP EXMOUTH.

Statistics.

The number of boys admitted during the year was 282 (322)* (including 134 (129) from extra-metropolitan parishes and unions), while the number discharged was 320 (298); 2 deaths occurred (1).

Of the discharges 105 (73) entered the Royal Navy, 147 (165) the Mercantile Marine, and 4 (11) the Army as musicians, and 64 (47) were returned to their respective parishes and unions.

At the end of the year there remained 657 (697) boys under training.

The statistical tables on pp. 65-7 supply detailed information concerning the boys under training.

* Italic figures in brackets throughout are the corresponding figures for 1910.

V.—GENERAL SUMMARY.

In conclusion, we submit the following brief summary of the number of persons who have been under the care of the Managers in their several institutions since the opening of the first hospital in 1870 :—

NUMBER OF PERSONS.					Admitted direct from homes or parishes and unions.	Remaining in the various Institutions Dec. 31st, 1911.
Fever patients	...	...	...	...	500,563	3,612
Smallpox patients	...	...	...	...	75,224	—
Imbeciles	...	...	...	...	31,769	7,270
Boys on training ship Exmouth	...	...	...	...	10,884	657
Children	...	...	...	...	50,817	3,216
Totals	...	...	...	...	669,257	14,755

VI.—MEDICAL SUPPLEMENT.

In continuance of the arrangement begun in 1896, there will be found at the end of this volume a Medical Supplement, edited by two of the Board's medical superintendents (Dr. E. W. Goodall and Dr. F. M. Turner), who have been appointed for that purpose by their colleagues. In this supplement there are included, in the first place, reports based on the records of the fever hospitals for 1911, dealing with the following subjects of a medical rather than of a general statistical nature :—

1. Complication and co-existent infectious diseases.
2. Post-scarlatinal diphtheria.
3. Summary of Antitoxin treatment of diphtheria.
4. Tracheotomy and intubation statistics.
5. Laparotomy statistics.
6. Miscellaneous diseases.

There are also included papers by three of the Board's medical officers.

(Signed) DONERAILE,

Chairman.

APPENDIX I.—INFECTIOUS DISEASES.

(Statistical tables detached from the Ambulance Committee's Report, p. 68.)

A.—AMBULANCE SERVICE.—Number of patients removed by the ambulances of the Board.

	From 1881 to 1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	TOTALS.
FEVER, DIPHTHERIA, &c.														
REMOVED :—														
From homes to hospitals	201,547	21,430	25,532	24,410	18,191	18,468	23,736	25,893	32,037	27,882	22,601	15,229	21,099	478,055
" general hospitals .. .. .	..	..	..	..	..	..	†1	†1	†1	†7	†1	†1	†1	13
Enteric fever from homes to general hospitals..	1,302	201	98	59	..	..	..	..	..	..	..	..	..	1,660
From general hospitals to homes, owing to want of room in the Managers' hospitals, or to the patients being extra-Metropolitan residents	3,589	20	159	51	44	44	37	24	3	6	1	1	..	3,979
RETURNED HOME :—														
Mistaken diagnoses	†	†	†	33	48	38	51	68	121	88	61	55	67	630
TRANSFERRED :—														
Convalescent to Northern and other hospitals	69,919	5,394	5,223	4,210	2,565	5,388	9,584	12,617	15,929	14,265	8,596	6,282	8,069	168,041
Other transfers between hospitals and wharves	89	39	201	66	43	3	642	21	75	8	2	4	54	1,247
DISCHARGED :—														
From northern hospitals to town hospitals ..	49,170	2,681	4,300	4,489	2,758	4,300	6,099	..	..	1	3	..	..	73,801
From Northern Hospital and conveyed from Eastern, Western, South-Eastern, North-Western, and South-Western Hospitals to other hospitals	828	29	126	293	229	306	574	..	..	..	..	..	..	2,385
From Southern Hospital to town hospitals ..	18,668	2,735	1,239	..	..	..	..	..	..	..	..	..	..	22,642
From Southern Hospital and conveyed from the South-Eastern, the South-Western, and the Brook Hospitals to other hospitals ..	789	233	87	..	..	..	..	..	..	..	..	..	..	1,109
From Northern Hospital direct home .. .. .	..	..	..	..	..	..	4	8	30	7	8	3	4	64
From Southern Hospital direct home .. .. .	..	..	..	..	..	..	257	21	14	21	42	29	13	397
From Northern Hospital to ambulance stations	..	..	..	..	..	..	609	3,315	3,730	3,245	4,674	2,829	4,093	22,495
From Southern Hospital to ambulance stations	..	..	..	..	..	..	1,185	4,699	7,382	8,342	3,415	3,388	3,614	32,025
From Joyce Green Hospital to ambulance stations .. .. .	..	..	..	..	..	..	..	..	244	156	..	..	..	400
From ambulance station to ambulance station ..	..	..	..	..	..	..	..	..	197	456	63	158	119	993
From ambulance stations to homes .. .. .	..	..	..	..	..	..	75	292	259	228	208	74	164	1,300
From other hospitals to homes	*5,253	577	642	623	663	972	1,267	1,094	1,259	1,611	1,495	863	2,047	18,366
Total fever and diphtheria patients	351,154	33,339	37,607	34,234	24,541	29,519	44,121	48,053	61,281	56,323	41,170	28,916	39,344	829,602*

SMALLPOX.		From 1881 to 1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	TOTALS.
REMOVED :—															
From homes to hospitals and wharves	..	19,446	94	1,848	7,830	422	494	80	33	15	8	28	9	8	30,388
RETURNED HOME; mistaken diagnoses	..	†	†	†	310	68	40	27	5	12	7	10	..	7	486
TRANSFERRED :—															
From hospitals to wharves	..	5,500	..	3	16	1	..	..	..	..	..	..	..	..	5,520
Other transfers between hospitals and wharves		17	..	2	33	1	..	..	..	..	..	..	..	..	53
DISCHARGED :—															
From hospitals and wharves to homes	..	10,640	31	118	567	15	30	3	3	..	..	2	3	23	11,435
Total smallpox patients	..	35,603	125	1,971	8,756	507	564	110	41	27	15	40	12	111	47,882
CONVEYANCE OF INFECTIOUS PATIENTS to places other than the Managers' hospitals		3,365	327	388	360	323	442	423	405	454	408	451	478	686	8,510
NON-INFECTIOUS REMOVALS.															
Imbecile	..	..	..	96	23	769	531	684	734	807	1,177	585	645	585	6,636
Ringworm	..	..	..	180	120	203	22	..	58	28	9	56	33	1	710
Ophthalmia	..	..	..	..	..	245	433	306	318	452	435	587	665	593	4,034
Defective and other children	..	..	..	13	129	90	219	314	271	165	176	87	240	472	2,176
Sick, convalescent, and debilitated children	..	..	..	..	..	..	..	..	..	..	..	2,808	4,298	5,066	12,172
Other patients (private removals)	..	..	..	..	..	..	68	134	424	841	1,291	1,794	1,914	2,279	8,745
Staff	..	..	..	..	..	..	..	1	2	3	36	35	39	46	162
Total non-infectious removals	..	..	..	289	272	1,307	1,273	1,439	1,807	2,296	3,124	5,952	7,834	9,042	34,635
Grand totals	..	390,122	33,791	40,255	48,622	26,678	31,798	46,093	50,306	64,058	59,870	47,613	37,240	49,183	920,629

† Not recorded.

B.—AMBULANCE SERVICE—(continued).

Return of work for the twelve months ended December 31st, 1911.

PARTICULARS OF WORK.	Number of journeys.	MILES RUN.					
		By horses.				By motor.	Total by vehicles.
		1	2	3	4		
I. INFECTIOUS CASES.							
Removals from home—							
To the Board's hospitals—							
Fever patients	19,661	66,107	..	..	..	123,002	189,109
Smallpox patients .. .. .	..	..	..	..	..	..	..
To the Board's wharves—							
Smallpox patients	67	530	..	..	..	319	849
To general hospitals	1	12	..	..	..	..	12
Other removals—							
From general hospitals to homes owing to want of room in the Board's hospitals, or to the patients being extra-metropolitan residents	..	..	..	..	..	..	..
Non-smallpox patients returned home	7	17	..	..	..	45	62
Other patients returned home ..	56	311	..	..	..	96	407
Patients sent for, but for various causes not removed (lost journeys)	222	614	..	..	..	1,204	1,818
Patients' friends taken from home to hospital	69	437	..	..	..	406	843
Patients' friends taken from hospital to home	61	380	..	..	..	149	529
Transfers between hospitals—							
Fever patients to Northern Hospital	472	..	..	..	..	12,740	12,740
Fever patients to Southern Hospital..	408	..	..	..	..	16,466	16,466
Other transfers between hospitals ..	19	95	..	..	..	167	262
Recovered patients—							
From Northern Hospital to homes ..	2	52	..	..	..	..	52
,, Southern	9	..	..	..	..	367	367
,, Northern .. to ambulance stations	404	21	..	..	..	14,063	14,084
,, Southern	320	..	..	..	..	11,787	11,787
,, Ambulance stations to homes	129	563	..	..	..	705	1,274
,, Ambulance station to ambu- lance station.. .. .	55	258	..	..	..	583	841
,, Acute fever hospitals to homes	1,251	8,612	..	..	..	6,957	15,596
,, Wharves (smallpox)	16	142	..	..	..	60	202
Conveyance of patients—							
To places other than Managers' hos- pitals (private removals)	661	2,411	..	..	..	5,513	7,924
Lost journeys do. do.	2	13	..	..	..	..	13
Totals	23,892	80,575	..	..	..	194,629	275,237
II. NON-INFECTIOUS CASES.							
Imbeciles	123	..	..	..	..	6,718	6,718
Ringworm children	1	..	..	..	..	23	23
Ophthalmic children	86	22	..	..	..	1,031	1,053
Defective and other children	52	..	..	..	..	1,577	1,577
To and from the Children's hospitals	578	182	..	..	..	17,375	17,557
To places other than the Managers' institutions (private removals) ..	1,858	7,504	..	..	..	17,222	24,726
Lost journeys	26	141	..	..	..	200	341
Totals	2,724	7,849	..	..	..	44,146	51,995
III. OTHER WORK.							
Service requirements and conveyance of general stores	1,726	6,037	5,482	..	..	16,794	26,501
Conveyance of Ambulance Committee	24	110	..	..	..	58	168
Conveyance of other committees ..	21	72	..	..	..	132	204
Conveyance of hospital stores—							
Fever .. .. .	..	..	..	..	..	..	..
Smallpox .. .. .	..	..	..	..	..	..	..
Conveyance of staff†	44	94	..	..	..	875	969
Horses in exchange	6	104	..	..	..	..	..
Testing cars	69	..	..	..	..	871	871
Totals	1,890	6,417	5,482	..	..	18,730	28,713
Totals for 1911	28,506	94,841	5,482	..	..	257,505	355,945
Totals for 1910	22,479	115,495	8,995	..	..	161,790	283,074
Totals for 1909	29,873	251,480	10,266	..	..	107,164	366,829
Totals for 1908	34,260	321,074	13,758	..	..	89,154	421,594
Totals for 1907	38,548	347,205	48,329	..	..	71,786	462,756
Totals for 1906	32,614	284,415	85,152	..	..	23,527	388,265
Totals for 1905	28,926	264,282	64,671	175	..	6,050	334,446
Totals for 1904	22,625	216,958	31,902	8	..	1,964	250,352
Totals for 1903	20,374	181,799	24,081½	330	..	..	205,676½
Totals for 1902	35,151	369,571½	19,836½	38	..	..	388,996
Totals for 1901	30,587	290,758	26,580	48	..	..	317,278
Totals for 1900	24,808	203,532	29,224	92	..	..	232,848
Totals for 1886 to 1899 (inclusive) ..	222,010	1,888,197	317,461	2,351	11,342	..	2,219,225
Grand totals	570,761	4,829,607½	685,738	3,042	11,342	718,940	6,227,284½

N.B.—The difference between the mileage totals for horses and vehicles is due to exchange horses.
† During the year 2,437 journeys were made, and 13,705 mi by motor omnibus, conveying the Queen Mary's Hospital and Darenth Asylum staff.

C.—RIVER SERVICE.

Number of patients, visitors, staff, &c., conveyed to and from Long Reach during the year 1911.

MONTH.				Patients conveyed to Long Reach.	Recovered cases conveyed from Long Reach.	Visitors conveyed to and from Long Reach including Managers).	Staff, &c., conveyed to and from Long Reach.	Totals.
January	..	..	..	..	..	..	15	15
February	..	..	..	43	..	2	19	64
March	..	..	..	14	20	9	50	93
April	..	..	..	3	24	4	40	71
May	..	..	..	1	5	..	38	44
June	..	..	..	..	1	..	26	27
July	..	..	..	..	..	3	27	30
August	..	..	..	..	..	..	29	29
September	..	..	..	..	..	..	36	36
October	..	..	..	..	..	..	23	23
November	..	..	..	..	..	..	24	24
December	..	..	..	..	..	3	38	41
Totals for 1911	..	..	..	61	50	21	365	497
Totals for 1910	..	..	..	7	11	37	402	457
Totals for 1909	..	..	..	15	10	19	829	873
Totals for 1908	..	..	..	1	1	13	799	814
Totals for 1907	..	..	..	458	2	5	412	877
Totals for 1906	..	..	..	27	27	18	637	709
Totals for 1905	..	..	..	51	57	121	569	798
Totals for 1904	..	..	..	437	418	90	711	1,656
Totals for 1903	..	..	..	349	321	34	1,631	2,335
Totals for 1902	..	..	..	7,239	6,002	5,708	5,667	24,616
Totals for 1901	..	..	..	1,614	633	1,300	1,906	5,453
Totals for 1900	..	..	..	64	69	42	1,460	1,635
Totals 1884 to 1899 (inclusive)	..	..	..	16,362	14,809	6,592	22,272	60,035
Grand totals	..	..	..	26,685	22,410	14,000	37,660	100,755

STEAMERS.

STEAMER.	Fires alight.		Under Steam.		Under Way.		Coal consumed.		Number of days when steam raised.	Distance run.
	Hours.	Mins.	Hours.	Mins.	Hours.	Mins.	Tons.	Cwts.		Miles.
" Albert Victor "	4,592	..	2,886	..	166	6	82	10	193	1,662
" Geneva Cross "	189	..	43	..	..	..	12	0	10	..
" Maltese Cross "	2,231	..	1,201	..	18	53	29	10	87	165
" White Cross "	4,804	..	3,160	..	242	3	36	0	204	2,846
" Red Cross "	100	..	51	..	..	..	..	..	5	..
Totals	11,916	..	7,341	..	427	2	160	0	499	4,673

Quantity of stores, parcels, &c., conveyed to and from Long Reach.

Weight, 114 tons, 9 cwts, 1 qr., 18 lbs

D.

REPORTS OF THE MEDICAL SUPERINTENDENTS OF THE BOARD'S FEVER HOSPITALS FOR THE YEAR 1911.

No. 1.

EASTERN HOSPITAL,

HOMERTON N.E.,

22nd February, 1912.

Statistics. The total number of patients under treatment was 2,596, being 1,196 more than last year.

Scarlet fever. The scarlet fever fatality was 2·66 per cent., a slightly lower figure than last year. One of the fatal cases was complicated with diphtheria, and another with septicæmia due to a wound of the palate.

" Return cases " of scarlet fever. The number of instances in which a case of scarlet fever apparently gave rise to fresh cases after its discharge was 8, being 3·4 per cent. of the discharges. The total number of " return cases " was 11.*

Diphtheria. The fatality of the diphtheria cases, exclusive of the bacteriological cases, was 8·19 per cent. This is rather higher than last year's rate, 7·72 per cent., which was the lowest ever recorded at the hospital. In 1 case death was due, not to diphtheria, but to whooping cough and pulmonary tuberculosis. Five of the bacteriological diphtheria cases were fatal from causes quite unconnected with the extremely mild form of diphtheria for which they were admitted; 2 from broncho-pneumonia, 1 from empyema, 1 from chronic heart disease and 1 from measles.

Of 400 completed diphtheria cases 131 were laryngeal, 32·7 per cent., a high proportion. They may be classified as follows:—

(a) cases not requiring operation	..	..	..	51	with 1 death.
(b) cases submitted to tracheotomy only	..	..	19	„	6 deaths.
(c) „ „ „ intubation only	..	..	27	„	0 „
(d) „ „ „ intubation followed by tracheotomy	..	..	13	„	8 „
(e) cases submitted to tracheotomy before admission			21	„	1 death.

The fatality of all the laryngeal cases is 12·2 per cent; of the 59 operated upon, (b), (c) and (d), 23·7 per cent.; of the intubated, (c) and (d), 20·0 per cent.

There were also 4 cases of tracheotomy, with 3 deaths, 5 of intubation, with 1 death, and 3 of intubation followed by tracheotomy, with 2 deaths, in diseases other than diphtheria, and 1 fatal case of intubation followed by tracheotomy in a case of diphtheria secondary to measles; so that the total number of cases operated upon in the hospital was 72.

Enteric fever. The enteric fever fatality was 10·53 per cent., half what it was last year.

* I desire to correct an error in the figures given in my report last year. The number of " return cases " was 8 (not 9), and the number of infecting cases 7 (not 8). The percentage of the infecting cases on the discharges was 6·1 (not 7·2).

Measles.

The fatality of the measles cases was very high, being 20·47 per cent. Two factors contribute towards the high rate; the one is that the bulk of the cases were drawn from the pauper class of the population, and the other that the virulence of the disease at the height of the epidemic was unparalleled, so far as London is concerned.

This is the first year during which cases of measles have been admitted to the Manager's hospitals except by accident. The first cases were admitted during the last week of December, 1910. A reference to the weekly returns issued by the Registrar General shows that the wave of the epidemic which swept over London during the winter of 1910 and spring of 1911 was at that time well on the rise. It first began to be seen as far back as July, 1910, when the weekly number of deaths was slightly, but persistently, above the average for the corresponding weeks of the previous five years; but it was not obtrusively noticeable till the end of October. For the week ending October 29th, the number of deaths was 44, 28 above the corrected average. Thence onwards for some weeks, the number of deaths was much above the average, though there was considerable difference from one week to another. The crest of the wave was reached the week ending March 18th, during which there were 197 deaths, 134 above the corrected average. The Registrar General noted that this was the highest number of deaths from measles recorded in London since the establishment of civil registration in 1838. The wave fell much more abruptly than it rose. For the week ending April 29th, the number of deaths was only 5 above the average; for the next week it was 1 below; then it was 3 above, and then, for the week ending May 20th, it was 19 below. Since that, up to the time of writing this report, the weekly number of deaths has been continuously below, except once when it equalled, the average, and since the middle of November considerably below it. During the week ending January 20th, 1911, there were only 8 deaths, 40 below the average. During the first three months of the year 1,428 deaths were registered in London. This number led one to suppose that as there had been a record number of deaths during one week, there was a considerable probability that 1911 would be a record year. But such was not the case. There were 823 deaths during the second quarter of the year, 179 during the third, and 140 during the fourth. Thus there were 2,570 deaths during the whole year, a number which falls short by 1,127 of the number of deaths during 1896, viz., 3,697. The admissions to this hospital follow these figures to a certain extent; the cases admitted during the four quarters respectively being 327, 278, 106 and 9. There were actually no admissions at all during the month of November.

It is impossible to state how many cases the 2,570 deaths represent, because measles is not in London a notifiable disease. In cities where it is notifiable the annual case-mortality has been found to vary considerably from one year to another. Thus in Aberdeen during the 20 years, 1883 to 1902, it varied from 0·9 to 8·6. The fatality (case-mortality) for the whole of London cannot be supposed to be as high as it was at the Eastern Hospital, viz., 20 per cent. A fatality of 7 per cent. would represent nearly 37,000 cases.

The most common cause of death was bronchitis or broncho-pneumonia, but a few cases died of the severity of the febrile attack. Many were extremely ill when admitted; 20 died within 48 hours of admission.

Works.

The discharge block I mentioned in my last report was brought into use just before the close of the year.

(Signed) E. W. GOODALL,
Medical Superintendent.

No. 2.

NORTH-EASTERN HOSPITAL.

ST. ANN'S ROAD,

TOTTENHAM, N.,

13th February, 1912.

Statistics. During the year 1911 the total number of patients treated was 3,449 ; of these 1,745 were discharged, 982 were transferred to other hospitals of the Board and 196 died. At the end of the year 526 remained under treatment.

Scarlet fever. The number treated was 1,508 ; of these 531 were discharged, 703 were transferred and 33 died. At the end of the year 241 remained under treatment. The mortality rate was 2·50.

Diphtheria. The number treated was 805 ; of these 463 were discharged, 129 were transferred and 68 died. At the end of the year 145 remained under treatment. The mortality rate was 10·11.

Bacteriological diphtheria. The number treated was 68 ; of these 64 were discharged and 1 was transferred. At the end of the year 3 remained under treatment. There was no death.

Enteric fever. The number treated was 37 ; of these 19 were discharged, 3 were transferred and 6 died. At the end of the year 9 remained under treatment. The mortality rate was 20·69.

Whooping cough. The number treated was 461 ; of these 173 were discharged, 128 were transferred and 55 died. At the end of the year 105 remained under treatment. The mortality rate was 13·68.

Measles. The number treated was 189 ; of these 152 were discharged, 15 were transferred and 20 died. At the end of the year 2 remained under treatment. The mortality rate was 11·11.

Other diseases. The number treated was 381 ; of these 343 were discharged, 3 were transferred and 14 died. At the end of the year 21 remained under treatment. The mortality rate was 3·91. The percentage error in the notifications was as follows :—scarlet fever 10·87, diphtheria 15·19, enteric fever 30·23, whooping cough 2·00, measles 11·57.

Staff illness. 1 sister, 1 staff nurse, 4 probationers and 4 second assistant nurses contracted scarlet fever. All recovered. 1 wardmaid remained warded with scarlet fever at the end of 1910. She recovered. 1 assistant medical officer, 1 staff nurse, 2 probationers, 4 second assistant nurses and 2 wardmaids contracted diphtheria. 1 staff nurse, 4 second assistant nurses, and 1 wardmaid recovered ; the others remained warded at the end of the year. 1 staff nurse contracted enteric fever and she remained warded at the end of the year.

(Signed)

FREDERIC THOMSON,

Medical Superintendent.

No. 3.

NORTH WESTERN HOSPITAL.

LAWN ROAD,

HAMPSTEAD, N.W.,

28th February, 1912.

Statistics. The total number of cases treated was 3,061. Of these 1,353 were discharged, 1,188 were transferred to other hospitals of the Board, 181 died. There remained under treatment on December 31st 339 patients.

Scarlet fever. The number treated was 1,241; 28 died. The mortality was 2.55 per cent.

Diphtheria. The number treated was 681; 56 died. The mortality was 9.48 per cent. There were 18 hæmorrhagic cases. 11 cases died within 24 hours of admission. There were 75 laryngeal cases; tracheotomy was performed in 35 of these cases of whom 4 died, the mortality of the tracheotomy cases being 11.4 per cent.

There were treated 116 cases of bacteriological diphtheria; none died.

Enteric fever. The number treated was 81; 9 died. The mortality was 12.24 per cent.

Measles. The number treated was 608; 67 died. The mortality was 11.73 per cent. Four cases died within 24 hours of admission. There were 8 cases complicated with diphtheria, of whom 4 died, the combination of measles and diphtheria being a very dangerous one. Of these 8 cases 5 required tracheotomy, of whom only one recovered. There were 46 cases complicated with whooping cough and 80 with broncho-pneumonia.

Staff illness. (a) Infectious diseases: 1 sister, 1 staff nurse, 1 second assistant nurse contracted enteric fever; 1 staff nurse, 3 second assistant nurses, 1 wardmaid contracted diphtheria; 1 staff nurse, 1 second assistant nurse, 2 probationers, 1 laundrymaid contracted scarlet fever; 2 second assistant nurses contracted measles. All recovered.

(b) Other diseases: One second assistant nurse died of septicæmia. 82 officers were warded with various ailments, 39 being cases of tonsillitis. All recovered.

The dining room for the sisters, which was opened in the end of the year, has proved satisfactory in every way and is appreciated greatly by them.

(Signed) JOHN MACCOMBIE,

Medical Superintendent.

WESTERN HOSPITAL.

SEAGRAVE ROAD,

FULHAM, S.W.,

13th February, 1912.

Statistics. The total number of patients treated during the past year was 2,827. This was 649 more than in the preceding year. 1,191 were discharged, 1,137 transferred to the convalescent hospitals and 187 died. 312 remained in the hospital at the end of the year.

Scarlet fever. Of scarlet fever 1,090 cases were treated. 626, or 66 per cent. were transferred, 327 discharged and 17 died. leaving 120 under treatment. The mortality was 1·74 per cent.

Diphtheria. Of diphtheria 774 cases were treated. 307, or 39 per cent. were transferred, 269 discharged and 70 died. 128 remained in hospital. The mortality was 10·43 per cent. 17 patients died within 24 hours after admission.

Tracheotomy was performed on 62 patients, of whom 18 died; a mortality of 29 per cent.

Of bacteriological diphtheria 6 cases were admitted, of which 3 were discharged and 3 remained at the end of the year.

Enteric fever. Of enteric fever 69 cases were treated, 44 discharged and 15 died, leaving 10 under treatment. The mortality was 26·08 per cent.

Measles. Of measles 400 cases were treated, 242 were discharged, 117, or 29 per cent., transferred and 40 died. One remained under treatment. The mortality was 10·02 per cent.

Whooping cough. Of whooping cough 251 cases were treated, 106 were discharged, 87, or 35 per cent., were transferred and 35 died. The mortality was 10·15 per cent.

Other diseases. One case of cerebro spinal fever was treated, and it died.

235 cases were found subsequent to admission to be suffering from other diseases. The percentage of error was, in respect of scarlet fever 5·5 per cent., of diphtheria 13·4 per cent., of enteric fever 35·6 per cent., of measles 9·0 per cent., and of whooping cough 4·8 per cent.

Two patients were admitted who were certified to have acute polio myelitis. One of these was found to be suffering from pneumonia and the other from tuberculous meningitis. Both died.

Staff illness. During the year 12 members of the staff contracted scarlet fever and 1 diphtheria. All recovered. 165 other members were warded with various ailments, and of these, I regret to say, two died, viz.:—a charge nurse of influenza and bronchitis, and a wardmaid of peritonitis. 4 remained warded at the end of the year.

Works. Two much needed improvements were carried out during the year:—(1) the deal flooring in four of the old scarlet fever wards and two isolation wards was overlaid with teak, and the sanitary annexes, kitchens, and entrance passages finished with terrazzo paving; (2) the slop-sinks in all the old wards were replaced by sinks of a modern type.

The erection of a house for the steward was commenced in the autumn and is approaching completion.

(Signed) R. M. BRUCE,
Medical Superintendent.

No. 5.

SOUTH-WESTERN HOSPITAL,

STOCKWELL, S.W.,

5th February, 1912.

Statistics.

The number of patients treated during the year was 2,199.

Of these 1,299 were discharged cured, 530 were transferred, 123 died, and 247 remained in hospital at the close of the year.

The scarlet fever death rate was 1·14 per cent.

The diphtheria death rate was 9·11 per cent.

The enteric fever death rate was 13·08 per cent.

The measles death rate was 11·36 per cent.

It is interesting to record that the scarlet fever mortality, 1·14 per cent., is less than half of what it has been in any previous year, and that it is only one-tenth of that of measles. The measles patients, however, were almost entirely drawn from the recipients of poor-law relief.

Of cases completed during the year the proportion found on admission to hospital to have been wrongly certified was 7·1 per cent, the figures being—for scarlet fever 6·6 per cent. ; for diphtheria 7·6 per cent. ; for measles 3·8 per cent. ; for enteric fever 52·4 per cent. ; the latter disease being, as usual, the one in respect to which the largest number of mistakes were made.

Of cases completed during the year, the number of patients who developed a second infectious disease in hospital was 129, or 6·6 per cent. In a good many instances the infection of the second disease was contracted before admission.

In 39 instances the intercurrent disease was chickenpox, in 37 scarlet fever, in 19 whooping cough, in 13 measles, in 12 German measles, and in 9 diphtheria. Of the latter 7 were post-scarlatinal.

The incidence of secondary infectious disease among the 269 patients treated in the cubicle wards was 1·8 per cent., whereas in the general wards it was 7·6 per cent.

In addition to these 269 patients (chickenpox and measles in the acute stage being the only diseases excluded) 177 scarlet fever convalescents were placed in one of the cubicle wards for the last two days and nights of their stay in hospital.

In all, 2,547 patients have passed through the cubicles during the 5 years they have been in use. As an extension of the isolation provision they have proved of the utmost service.

Works.

The only work of any importance carried out during the year has been the re-flooring with oak of the wards in B block, the bathrooms and lavatories being at the same time repaved with terrazzo. Only one of the ward blocks, block A, now remains to be dealt with.

Staff illness.

During the year 6 members of the staff contracted an infectious illness. All recovered, as did 110 others who were warded for some non-infectious ailment.

(Signed)

F. FOORD CAIGER,

Medical Superintendent.

No. 6.

GROVE HOSPITAL,

TOOTING GROVE,

TOOTING GRAVENEY, S.W.,

7th February, 1912.

Statistics. The number of patients under treatment during the past year has been 2,715. Of these 1,161 were discharged, 1,068 were transferred to the convalescent hospitals, and 112 died ; leaving in hospital at the end of the year a total of 374. The direct admissions comprised 1,319 cases of scarlet fever, 536 of diphtheria, 53 of bacteriological diphtheria, 79 of measles, 278 of whooping cough, 1 of cerebro-spinal fever, and 225 suffering from other diseases.

Scarlet fever. As regards scarlet fever 1,319 cases were admitted and 17 deaths occurred, giving a case mortality of 1·33 per cent. Amongst these were 12 patients who were certified to be suffering from diphtheria, and 1 patient certified epidemic cerebro-spinal meningitis at the time of admission.

Diphtheria. 536 diphtheria patients were admitted and 40 deaths occurred, giving a case mortality of 7·58 per cent. 3 patients were found to have diphtheria at the time of admission who were certified to be suffering from scarlet fever, and 1 patient who was certified to have whooping cough. Antitoxin was given in 98·2 per cent. of the cases.

Measles. 79 measles patients were admitted and 11 deaths occurred, giving a case mortality of 13·33 per cent. Amongst these were 20 patients certified to be suffering from scarlet fever, 6 who were certified to be suffering from diphtheria, and 1 certified as membranous croup. The case mortality is somewhat high ; but more than half the patients admitted were under 3 years, and nearly two-thirds of the deaths occurred under that age.

Whooping cough. 278 patients suffering from whooping cough were admitted and 37 deaths occurred, giving a case mortality of 14·65 per cent. Amongst these are included 1 patient certified as scarlet fever, and 1 certified as measles. The whooping cough mortality is influenced unfavourably by the fact that there were only 3 patients in hospital at the beginning of the year, as compared with 56 at the end of the year. There were a number of marasmic infants among the whooping cough patients, and nearly five-sixths of the deaths occurred among children under 2 years of age.

Cerebro-spinal fever. Only 1 patient was admitted who had been certified as a case of scarlet fever, otitis and meningitis. The diagnosis was confirmed by a bacteriological examination of the fluid obtained from a lumbar puncture.

Other diseases. Among the 2,491 cases admitted were 225 patients who were diagnosed to be suffering from diseases other than those for which accommodation has been provided. The percentage of cases in which a different diagnosis was made subsequent to admission amounted to 10·8 in the case of scarlet fever patients, 15·5 for diphtheria patients, 14·7 for measles patients, and 2·1 for whooping cough patients. 5 of the scarlet fever patients suffered from diphtheria during convalescence, or a percentage incidence of 0·4 on the completed cases. The corresponding incidence in 1910 was 0·23. 13 of the completed cases of diphtheria contracted scarlet fever while in hospital, or a percentage incidence of 2·5. This is considerably lower than the incidence during the previous year, when it amounted to 8·9 per cent.

Average residence.

The average stay of scarlet fever patients in hospital was about two days longer than in 1910 ; the increase being almost certainly due to the much higher incidence of secondary diseases, especially measles and chickenpox. The average residence of the diphtheria patients shows a reduction of more than 5 days for the recovered cases. This is due to the greatly lessened incidence of scarlet fever among the diphtheria patients. The average residence of the measles patients is very high, but this is largely due to so many of the measles patients suffering from whooping cough in addition. In 16 instances the patients had concurrent attacks of measles and whooping cough on admission. The great effect produced by this cause is well seen from the fact that 3 measles patients—transferred from the North Western Hospital with whooping cough—added a period of 7·45 days to the average residence of the whole of the measles patients treated last year.

The average residence of the whooping cough patients is also high, viz., 95·4 days for the recovered cases. The average stay of whooping cough patients will probably be always higher than that of the other diseases which are admitted. It certainly was increased by the admission of a number of marasmic infants from the infirmaries.

The proportion of scarlet fever patients transferred to the convalescent hospitals was 70·2 per cent., as compared with 66·4 per cent. in 1910.

Return cases.

25 return cases were reported during the year in connection with patients discharged from the hospital direct. 19 of these were cases of scarlet fever arising subsequent to the discharge of 15 scarlet fever patients, and 6 were cases of diphtheria arising subsequent to the discharge of 6 diphtheria patients. The infectivity rate for scarlet fever was 4·2, as compared with 2·7 in 1910 and 3·5 in 1909.

The following particulars refer to the 19 return cases which originated in connection with the discharge of 15 scarlet fever patients :—

The interval which elapsed between the discharge of the infecting case and the occurrence of the return case was 7 days or under in 8 instances, from 8 to 14 days in 7, from 15 to 21 in 3, from 22 to 28 in 0, and over 28 in 1 (viz., 32 days). Of the 15 cases 5 suffered from nasal discharge while in hospital, and 2 from a discharge from the nose and ears. In 8 instances no discharges were observed during the time the patients were in hospital. 9 of the infecting cases were discharged from hospital between October and March, and 6 between April and September. As regards the ages of the infecting cases 6 were under 5, 4 from 5 to 10, and 5 were over 10.

The average residence of the infecting cases was 59·73 days, as compared with an average residence of 65·17 days for all scarlet fever patients discharged direct to their homes.

Staff illness.

(a) Infectious diseases : 7 officers contracted scarlet fever, 9 contracted diphtheria. All recovered. (b) Other diseases : 189 officers were off duty with various ailments. One sister died at the Brompton Hospital for Consumption from tubercle of the lungs.

Works.

No important works were undertaken during the past year.

(Signed)

J. E. BEGGS,

Medical Superintendent.

SOUTH-EASTERN HOSPITAL,

AVONLEY ROAD, NEW CROSS, S.E.

7th February, 1912.

Statistics. During the past year there were 3,281 cases under treatment, or 595 more than in the preceding year. The rise is accounted for by the admission of cases of whooping cough and measles, which were not previously taken in here. These two diseases were most prevalent in the spring, when the three chief diseases formerly admitted are usually at their lowest. The mortality for both these diseases was high and contrasts greatly with that from scarlet fever, which was 1·77, lower than any rate previously recorded for this hospital.

CASE MORTALITY RATES :—

	1911.	1910.	1900–1909.
Scarlet fever	1·77	3·01	3·53
Diphtheria	7·04	8·22	11·94
Enteric fever	9·82	13·64	12·85
Measles	12·64	12·5	—
Whooping cough	11·45	—	—

For each of the first three diseases the rate is unusually low. The heavy rates in the latter two diseases are partly due to the tender age of those attacked. Of measles cases 37 per cent. and of whooping cough 39 per cent. were under 2 years of age. But the chief cause was the very sickly condition of many of the patients before they were attacked, as shewn by their lack of size and weight.

The proportion of cases transferred to the total completed cases, including deaths, was for scarlet fever 54·6 per cent., diphtheria 14·8, measles 13·8, and whooping cough 35·1.

The average number of days' stay in hospital for each disease is given below :—

	Recovered cases.	Fatal cases.
Scarlet fever	47·7	5·5
Diphtheria	50·0	8·3
Enteric fever	56·7	14·1
Measles	38·0	14·8
Whooping cough	56·8	28·4

The presence of a larger proportion of mild scarlet fever and diphtheria cases in our admissions as compared with say ten or twenty years ago is shewn in the lowered mortality, and also accounts in great part for the lowered period of detention. For the two latter diseases in the table comparisons with previous years are not available. Amongst the whooping cough cases there was a tendency to send those of long standing to convalescent hospitals, so that the period would have been longer if worked out on an unselected group of cases.

The return cases notified, *i.e.*, the number of outbreaks occurring in houses to which a patient from this hospital had been discharged within three months previously were :—

RETURN CASES :—

	Scarlet fever.	Diphtheria.
No. of cases discharged	536	534
No. of outbreaks occurring in same houses :—		
(a) Scarlet fever	13	4
(b) Diphtheria	1	2

For outbreaks of scarlet fever arising after a scarlet fever discharge the rate was 2·4 per cent., and for diphtheria outbreaks after a diphtheria discharge 0·75 per cent. Both rates are low compared with previous years, in spite of the shortened period of detention.

During the year two wards were devoted to an experiment carried out by Dr. Cameron, commenced in April, 1910, to try and get improved results both as to return cases and as to certain complications presumed to be infectious, by increased care in certain nursing details. I submit a report which he has drawn up. [*See Medical Supplement*].

The cases sent in where the original diagnosis was not confirmed numbered 285. In most of these no evidence could be discovered of the disease named on the certificate, but so trivial are the symptoms in some mild cases of each of the five diseases that it is impossible to say that some of these 285 may not have been correctly sent in. But taking my conclusions to be correct the following shews the proportion of error in each disease :—

	Certified as	Scarlet fever.	Diph- theria.	Enteric.	Measles.	Whooping Cough.
Admitted with correct diagnosis	1,260	761	78	373	220	
Admitted with incorrect diagnosis	144	65	31	23	15	
Total ...	1,404	826	109	396	235	
Ratio per cent. of erroneous diagnosis ...	10·2	7·9	28·5	5·8	6·4	

Staff illness. 12 officers, all of the nursing staff, contracted infectious illness during the year ; of these 6 had scarlet fever and 6 diphtheria. 1 nurse had two attacks of diphtheria and has been counted twice over in the above and in the official return. In all 113 officers were warded, a slightly higher figure than last year. I regret to say that one assistant nurse died from pneumonia after a short illness. The official returns only include cases warded and the number of days lost in the ward. Unfortunately a serious accident deprived us of the services of the engineer on July 12th, and he was still off duty at the end of the year.

(Signed) F. M. TURNER,
Medical Superintendent.

No. 8.

BROOK HOSPITAL.

SHOOTERS HILL, WOOLWICH,

21st February, 1912.

Statistics. The number of patients treated during 1911 was 2,978. Of these 1,139 were discharged recovered, 1,344 were transferred to other hospitals of the Board and 142 died. 353 remained under treatment at the end of the year.

Scarlet fever. 1,426 cases were treated, with the very low mortality of 1·51 per cent. There were 6 cases of post-scarlatinal diphtheria, all of which recovered.

Diphtheria. 911 cases were treated, with a mortality of 8·16 per cent. 381 more cases were admitted than in 1910, and the type of disease was distinctly more severe than in that year. There were 15 cases of hæmorrhagic diphtheria, and 13 cases died within 24 hours of admission. 49 cases were operated upon for laryngeal diphtheria. Intubation was performed in 29 cases, with a mortality of 13·8 per cent., and tracheotomy in 13 cases, with a mortality of 38·5 per cent. 7 cases were submitted to tracheotomy after intubation with a mortality of 85·8 per cent. Intubation was the operation of election, and this no doubt partly explains its lower death rate.

Enteric fever. No case of enteric fever was admitted to this hospital during 1911.

Measles. 414 cases were treated, with a mortality of 12·86 per cent. In considering this mortality it must be remembered that the large majority of measles cases admitted to the Board's hospitals are pauper children of poor physique and of impaired powers of resistance to disease. But even after due allowance is made for this circumstance it will be seen that measles stands out as a disease more fatal than diphtheria, and far more fatal than scarlet fever. It cannot be doubted that these debilitated children with measles have a far better chance of recovery in the Board's hospitals than in their own homes. It is noteworthy that 75 per cent. of the cases and 92 per cent. of the deaths occurred in children under 5 years of age.

Other diseases. 6 cases of whooping cough were admitted and 2 died. 1 case of cerebro-spinal fever was admitted and was discharged recovered. The diagnosis as certified on admission was not confirmed in 199 cases. Of these 90 were certified scarlet fever, 71 were certified diphtheria, and 38 were certified measles. German measles was a fruitful source of error. 24 cases of this disease were certified scarlet fever and 35 were certified measles.

Staff illness. 13 nurses and 1 wardmaid contracted scarlet fever during the year. 11 members of the staff contracted diphtheria, and 109 were warded with various other ailments. All recovered. The rather heavy incidence of infectious illness amongst the staff is due to the circumstance that a number of new nurses and other officers were engaged during the year. It was almost entirely amongst these new comers that the cases of infectious illness occurred.

(Signed) J. B. BYLES,
Medical Superintendent.

No. 9.

NORTHERN HOSPITAL,

WINCHMORE HILL, N.,

1st February, 1912.

Statistics. The number of patients treated was 4,624 ; of these 4,159 were discharged recovered and 5 died.

459 remained under treatment at the end of the year.

The admissions comprise 2,499 cases of scarlet fever, 949 of diphtheria, 418 of measles and 319 whooping cough.

Average residence. The average length of stay in this hospital was 33·24 days for patients suffering from scarlet fever, 22·90 for diphtheria, 24·18 for measles and 36·28 for whooping cough.

Cross infection. As regards these the outstanding feature was an epidemic of German measles, which occurred in the spring of the year, and attacked 37 scarlet fever patients, 16 diphtheria patients, 23 measles patients and 20 whooping cough patients.

Scarcely any of the patients contracted measles, which is a matter for congratulation seeing how prevalent this disease was in the metropolis last spring.

As regards whooping cough, 5 scarlet fever patients contracted this complaint against 12 in 1910, when whooping cough was not admitted. Its percentage incidence amongst the diphtheria patients was practically the same for both years.

As many as 11 measles patients however contracted whooping cough.

Works. New offices for the steward and the steward's clerks have been built and are a great improvement in the administration of the steward's department.

Staff illness. 4 members of the staff contracted scarlet fever, 1 contracted diphtheria, and 55 other members of the staff were warded with various other ailments. All recovered.

(Signed) C. E. MATTHEWS,
Medical Superintendent.

No. 10.

SOUTHERN HOSPITAL.

DARTFORD, KENT,

29th January, 1912.

Statistics. The number of patients treated during the year was 4,024. Of these 3,613 were discharged, 2 were transferred to other hospitals of the Board, 2 died and 407 remained in hospital at the end of the year.

Of the admissions 3,027 were cases of scarlet fever, 613 diphtheria, 64 measles, 5 whooping cough and 8 of other diseases.

The average duration of stay in hospital was :—

30.2	days	in	the	case	of	scarlet	fever.
24.6	„	„	„	„	„	diphtheria.	
34.4	„	„	„	„	„	measles.	

The maximum number of patients under treatment was 531 on the 21st November and the minimum number 169 on the 10th March.

Staff illness. 4 officers contracted an infectious disease, viz., 2 nursing attendants scarlet fever, and 2 assistant nurses German measles. 84 officers were warded for various ailments. All recovered.

Five blocks of 38 beds each were prepared for the reception of convalescent cases of measles and whooping cough but only one was required for use.

(Signed) J. HOWELL GRIFFITHS,
Medical Superintendent.

E.—FEVER STATISTICS—

EASTERN HOSPITAL.

DISEASES.	Re- main- ing on Dec. 31st, 1910.	Admitted during 1911.		Total under treatment during 1911.	Discharged during 1911.		Died during 1911.	Mortality per cent.	Re- main- ing on Dec. 31st, 1911.
		Direct from homes.	From other hospitals of Board.		Recovered.	To other hospitals of Board.			
Scarlet	49	701	1	751	230	407	18	2.66	96
Diphtheria	51	430	..	481	147	219	34	8.19	81
Diph. bacteriological	3	73	..	76	31	28	5	7.30	12
Enteric	17	80	..	97	82	..	9	10.53	6
Measles	23	720	..	743	403	184	149	20.47	7
Whooping cough ..	..	8	..	8	1	5	..	..	2
Cerebro-spinal fever	..	1	..	1	1	..	..	..	..
	143	2,013	1	2,157	895	843	215	10.84	204
Other diseases ..	6	433	..	439	385	..	33	7.7	21
Totals	149	2,446	1	2,596	1,280	843	248	..	223

NORTH EASTERN HOSPITAL.

Scarlet	140	1,368	..	1,508	531	703	33	2.50	24
Diphtheria	122	683	..	805	463	129	68	10.11	14
Diph. bacteriological	3	65	..	68	64	1	..	..	3
Enteric	7	30	..	37	19	3	6	20.69	9
Measles	16	168	5	189	152	15	20	11.11	2
Whooping cough ..	13	439	9	461	173	128	55	13.68	10
	301	2,753	14	3,068	1,402	979	182	6.80	50
Other diseases ..	25	356	..	381	343	3	14	3.91	2
Totals	326	3,109	14	3,449	1,745	982	196	..	52

NORTH WESTERN HOSPITAL.

Scarlet	112	1,129	..	1,241	241	795	28	2.55	17
Diphtheria	67	614	..	681	227	289	56	9.48	10
Diph. bacteriological	3	113	..	116	99	9	..	..	8
Enteric	8	70	3	81	65	..	9	12.24	4
Measles	42	566	..	608	415	94	67	11.73	3
Whooping cough ..	..	1	..	1	1	..	..	..	..
Typhus .. ..	..	..	..	..	..	..	..	..	..
Cerebro-spinal fever	..	..	..	..	..	..	..	..	..
	232	2,493	3	2,728	1,048	1,187	160	6.54	33
Other diseases ..	14	319	..	333	305	1	21	6.80	1
Totals	246	2,812	3	3,061	1,353	1,188	181	..	33

WESTERN HOSPITAL.

Scarlet	108	982	..	1,090	327	626	17	1.74	12
Diphtheria	78	696	..	774	269	307	70	10.43	12
Diph. bacteriological	..	6	..	6	3	..	..	..	1
Enteric	13	56	..	69	44	..	15	26.08	1
Measles	1	399	..	400	242	117	40	10.02	3
Whooping cough ..	14	226	11	251	106	87	23	10.15	3
Cerebro-spinal fever	..	1	..	1	..	..	1	100.00	..
	214	2,366	11	2,591	991	1,137	166	7.11	29
Other diseases ..	1	235	..	236	200	..	21	9.21	1
Totals	215	2,601	11	2,827	1,191	1,137	187	..	31

SOUTH WESTERN HOSPITAL.

Scarlet	121	783	..	904	254	508	9	1.14	13
Diphtheria	86	475	..	561	430	17	44	9.11	7
Diph. bacteriological	1	5	..	6	6	..	..	..	..
Enteric	22	46	..	68	54	..	7	13.08	..
Typhus .. ..	..	..	..	..	..	..	..	..	..
Measles	29	440	..	469	385	5	50	11.36	2
Whooping cough ..	..	6	..	6	2	..	..	..	..
	259	1,755	..	2,014	1,131	530	110	6.24	24
Other diseases ..	3	182	..	185	168	..	13	7.16	1
Totals	262	1,937	..	2,199	1,299	530	123	..	24

GROVE HOSPITAL.

Scarlet	115	1,319	..	1,434	352	871	17	1.33	19
Diphtheria	87	536	..	623	342	137	40	7.58	10
Diph. bacteriological	1	53	..	54	52	..	..	..	..
Enteric .. ..	..	..	..	..	..	..	..	..	..
Measles .. ..	..	79	4	83	56	15	11	13.33	..
Whooping cough ..	3	278	1	282	147	42	37	14.65	5
Cerebro-spinal fever	..	1	..	1	..	..	1	100.00	..
	206	2,266	5	2,477	949	1,065	106	4.83	35
Other diseases ..	13	225	..	238	212	3	6	2.69	1
Totals	219	2,491	5	2,715	1,161	1,068	112	..	37

TABLE I.—*Admissions, discharges, and deaths during 1911.*

SOUTH EASTERN HOSPITAL.									
DISEASES.	Re- maining on Dec. 31st, 1910.	Admitted during 1911.		Total under treatment during 1911.	Discharged during 1911.		Died during 1911.	Mortality per cent.	Re- maining on Dec. 31st, 1911.
		Direct from homes.	From other hospitals of Board.		Recovered.	To other hospitals of Board.			
Scarlet	*112	1,260	4	1,376	536	670	22	1·77	148
Diphtheria	91	761	..	852	534	102	51	7·04	165
Diph. bacteriological ..	..	28	..	28	25	1	†2	..	..
Enteric	*21	78	..	99	77	..	8	9·82	14
Measles	*7	373	3	383	257	49	46	12·64	31
Whooping cough ..	11	220	2	233	125	82	26	11·45	..
Cerebro-spinal fever ..	..	1	..	1	1	..	..	..	..
	242	2,721	9	2,972	1,555	904	155	5·80	358
Other diseases ..	*23	286	..	309	283	2	12	4·12	12
Totals	265	3,007	9	3,281	1,838	906	167	..	370
BROOK HOSPITAL.									
Scarlet	150	1,276	..	1,426	275	949	19	1·51	183
Diphtheria	72	839	..	911	328	362	65	8·16	156
Diph. bacteriological ..	..	13	..	13	11	..	..	..	2
Enteric .. ..	..	..	..	..	..	..	..	..	..
Measles	3	399	12	414	333	27	53	12·86	1
Whooping cough ..	..	6	..	6	1	2	2	36·36	1
Typhus .. ..	..	..	..	..	..	..	..	..	..
Cerebro-spinal fever ..	..	1	..	1	1	..	..	..	..
	225	2,534	12	2,771	949	1,340	139	5·59	343
Other diseases ..	6	201	..	207	190	4	3	1·51	10
Totals	231	2,735	12	2,978	1,139	1,344	142	..	353
NORTHERN HOSPITAL.									
Scarlet	*334	..	2,499	2,833	2,534	..	2	0·08	297
Diphtheria	*64	..	949	1,013	882	..	..	..	131
Diph. bacteriological ..	..	..	36	36	36	..	..	..	..
Measles .. ..	..	..	418	418	416	..	2	0·47	..
Whooping cough ..	..	..	319	319	286	1	1	0·33	31
	398	..	4,221	4,619	4,154	1	5	0·12	459
Other diseases ..	..	..	5	5	5	..	..	..	..
Totals	398	..	4,226	4,624	4,159	1	5	..	459
SOUTHERN HOSPITAL.									
Scarlet	294	..	3,027	3,321	2,993	2	2	0·06	324
Diphtheria	8	..	613	621	539	..	..	..	82
Diph. bacteriological ..	..	..	3	3	3	..	..	..	..
Measles .. ..	..	..	64	64	64	..	..	..	..
Whooping cough ..	..	..	5	5	5	..	..	..	..
	302	..	3,712	4,014	3,604	2	2	0·11	406
Other diseases ..	2	..	8	10	9	..	..	..	1
Totals	304	..	3,720	4,024	3,613	2	2	..	407
SUMMARY.									
Scarlet	*1,535	8,818	(5,531)	10,353	8,273	(5,531)	167	1·94	1,913
Diphtheria	*726	5,034	(1,562)	5,760	4,161	(1,562)	428	8·90	1,171
Diph. bacteriological ..	*11	356	(39)	367	330	(39)	7	2·02	30
Enteric	*88	360	(3)	448	341	(3)	54	14·30	53
Measles	*121	3,144	(506)	3,265	2,723	(506)	438	13·89	104
Whooping cough ..	41	1,184	(347)	1,225	847	(347)	144	13·24	234
Typhus .. ..	..	..	..	..	..	..	..	..	..
Cerebro-spinal fever ..	..	5	..	5	3	..	2	40·00	..
Totals	2,522	18,901	(7,988)	21,423	16,678	(7,988)	1,240	6·72	3,505
Other diseases ..	*93	2,237	(13)	2,330	2,100	(13)	123	5·51	107
Grand totals ..	2,615	21,138	(8,001)	23,753	18,778	(8,001)	1,363	..	3,612

NOTES.—The mortalities returned as above include all deaths occurring from intercurrent diseases.

The mortality rates are calculated according to the Registrar-General's Formula—*i.e.*, by dividing the deaths, multiplied by 100, by half the sum of the admissions, discharges, and deaths for the year.

* These figures differ from those given in the committee's report for 1910, pp. 176-7, owing to the subsequent correction of errors of diagnosis.

† These two cases were infants. Both died 2 days after admission. One from inanition, one from broncho-pneumonia.

TABLE II.—SEASONAL STATISTICS.—*Summary of monthly admissions, transfers, discharges and deaths, during 1911.*

ADMISSIONS.																				
MONTH.	Scarlet.		Diphtheria.		Diphtheria bacterio-logical.		Enteric.		Measles.		Whooping cough.		Typhus.	Cerebro-spinal fever.	Other diseases.		Total.			
	Direct.	Transfers.	Direct.	Transfers.	Direct.	Transfers.	Direct.	Transfers.	Direct.	Transfers.	Direct.	Transfers.			Direct.	Transfers.				
January ..	497	296	370	67	15	1	21	3	307	3	106	..	..	..	167	..	1,483			
February ..	468	194	396	79	21	..	11	..	524	14	108	..	..	1	192	..	1,721			
March ..	462	276	353	119	19	2	5	..	792	90	153	23	..	..	235	2	2,019			
April ..	443	215	327	84	29	2	9	..	454	178	122	25	..	2	219	2	1,605			
May ..	640	376	339	76	27	1	11	..	300	63	120	61	..	..	187	..	1,624			
June ..	654	417	360	117	26	2	12	..	250	78	130	49	..	1	169	1	1,602			
July ..	810	525	390	99	38	4	21	..	200	46	97	50	..	..	185	..	1,741			
August ..	647	427	294	73	23	1	28	..	71	24	59	45	..	..	134	1	1,256			
September ..	1,040	609	451	116	29	5	121	..	46	8	80	22	..	1	196	..	1,964			
October ..	1,293	831	595	222	41	6	70	..	69	2	64	13	..	..	218	5	2,350			
November ..	1,035	781	625	289	58	4	33	..	37	..	53	37	..	..	182	1	2,023			
December ..	829	584	534	221	30	11	18	..	94	..	92	22	..	..	153	1	1,750			
Totals ..	8,818	5,531	5,034	1,562	356	39	360	3	3,144	506	1,184	347	..	5	2,237	13	21,138			
DISCHARGES.																				
MONTH.	Scarlet.		Diphtheria.		Diphtheria bacterio-logical.		Enteric.		Measles.		Whoop- ing cough.		Typhus.	Cerebro-spinal fever.	Other diseases.		Totals.			
	Recovered.	To other hospitals of the Board.	Recovered.	To other hospitals of the Board.	Recovered.	To other hospitals of the Board.	Recovered.	To other hospitals of the Board.	Recovered.	To other hospitals of the Board.	Recovered.	To other hospitals of the Board.			Recovered.	To other hospitals of the Board.	Recovered.	Transfers.		
January ..	763	296	323	67	15	1	43	3	65	3	3	..	..	..	140	..	1,352	370		
February ..	511	194	307	79	12	..	38	..	208	14	27	..	..	..	150	..	1,253	287		
March ..	642	276	345	119	21	2	11	..	409	90	56	23	..	..	253	2	1,737	512		
April ..	432	215	329	84	19	2	21	..	474	178	48	25	..	..	192	2	1,515	506		
May ..	525	376	365	76	16	1	1	..	476	63	100	61	..	..	186	..	1,669	577		
June ..	552	417	326	117	42	2	10	..	348	78	157	49	..	..	192	1	1,627	664		
July ..	564	525	324	99	26	4	9	..	274	46	104	50	..	..	129	..	1,430	724		
August ..	721	427	346	73	28	1	18	..	185	24	94	45	..	2	177	1	1,571	571		
September ..	707	609	284	116	23	5	14	..	132	8	71	22	..	..	146	..	1,377	760		
October ..	758	831	328	222	32	6	48	..	58	2	103	13	..	..	156	5	1,483	1,079		
November ..	1,068	781	414	289	39	4	79	..	48	..	57	37	..	1	204	1	1,910	1,112		
December ..	1,030	584	470	221	57	11	49	..	46	..	27	22	..	..	175	1	1,854	839		
Totals ..	8,273	5,531	4,161	1,562	330	39	341	3	2,723	506	847	347	..	3	2,100	13	18,778	8,001		
DEATHS.																				
	Scarlet.		Diphtheria.		Diphtheria bacterio-logical.		Enteric.		Measles.		Whooping cough.		Typhus.		Cerebro- spinal fever.		Other diseases.		Total	
January ..	17		39		..		5		40		12		..		..		4		107	
February ..	13		39		..		1		48		8		..		1		14		124	
March ..	12		34		..		1		104		17		..		..		8		176	
April ..	12		39		1		2		81		27		..		1		10		173	
May ..	12		24		2		..		61		16		..		..		8		123	
June ..	12		25		1		..		29		12		..		..		10		89	
July ..	20		33		..		1		30		5		..		..		10		99	
August ..	10		28		2		2		18		16		..		..		10		86	
September ..	14		35		1		15		5		13		..		..		16		99	
October ..	13		35		..		14		8		3		..		..		13		86	
November ..	17		46		..		9		6		9		..		..		12		99	
December ..	15		51		..		4		8		6		..		..		8		92	
Totals ..	167		428		7		5		438		144		..		2		123		1,363	
MORTALITIES PER CENT.																				
	Scarlet.		Diphtheria.		Diphtheria bacterio-logical.		Enteric.		Measles.		Whooping cough.		Typhus.		Cerebro- spinal fever.		Other diseases.		Total.	
January ..	2.66		10.66		..		14.49		19.41		19.83		..		..		2.57		7.93	
February ..	2.62		10.51		..		4.00		12.30		11.19		..		100.00		7.36		8.00	
March ..	2.15		9.29		..		11.76		16.00		15.04		..		..		3.23		8.95	
April ..	2.71		11.22		4.88		12.50		16.04		27.55		..		66.66		4.75		10.51	
May ..	2.04		6.59		4.89		..		14.57		13.56		..		..		4.20		7.20	
June ..	1.97		7.03		2.90		..		9.25		8.03		..		..		5.39		5.36	
July ..	2.87		8.84		..		6.45		11.90		4.85		..		..		6.17		6.05	
August ..	1.45		8.38		7.55		8.33		12.95		19.39		..		..		6.23		5.90	
September ..	1.59		9.09		3.77		20.00		5.46		15.85		..		..		8.93		5.75	
October ..	1.26		7.31		..		21.21		11.85		3.53		..		..		6.72		4.39	
November ..	1.60		8.48		..		14.87		13.18		15.13		..		..		6.03		4.91	
December ..	1.60		9.67		..		11.27		10.80		9.60		..		..		4.76		4.98	
Totals ..	1.94		8.90		1.45†		14.30		13.89		13.24		..		40.00		5.51		6.6	

† See footnote in Table I.

For Table III. see p. 121.

FEVER STATISTICS.—TABLE IV.—Scarlet fever admissions

AGES.	EASTERN HOSPITAL.					NORTH-EASTERN HOSPITAL.					NORTH-WESTERN HOSPITAL.					WESTERN HOSPITAL.								
	Males.		Females.		Total.	Males.		Females.		Total.	Males.		Females.		Total.	Males.		Females.		Total.				
	Admitted.	Died.	Admitted.	Died.		Admitted.	Died.	Admitted.	Died.		Admitted.	Died.	Admitted.	Died.		Admitted.	Died.	Admitted.	Died.		Admitted.	Died.		
Under 1	1	..	3	..	..	10	1	5	..	10	1	4	..	4	..	8	1	1	..	1	..	
1 to 2	15	2	33	3	5	62	7	36	1	62	7	22	1	22	1	38	17	1	..	28	2			
2 to 3	26	2	59	2	4	127	7	57	2	127	7	34	3	34	3	75	22	..	..	51	1	
3 to 4	32	2	56	1	3	134	4	65	1	134	4	54	2	54	2	90	48	..	..	80	2	
4 to 5	37	1	87	3	4	192	5	100	1	192	5	55	2	55	2	101	62	1	..	119	2			
5 to 10	142	1	292	1	2	558	6	324	2	558	6	278	2	278	2	510	218	1	..	414	7			
10 to 15	61	..	120	..	..	169	1	96	..	169	1	104	2	104	2	186	82	1	..	144	2	
15 to 20	12	..	24	..	..	39	1	22	..	39	1	19	..	19	..	34	23	..	..	61	..
20 to 25	4	..	12	..	..	35	1	23	..	35	1	19	..	19	..	30	25	..	..	33	..
25 to 30	7	..	13	..	..	23	..	17	..	23	..	22	..	22	..	30	20	..	..	27	..
30 to 35	1	..	2	..	..	15	..	9	..	15	..	15	..	15	..	19	7	..	..	11	..
35 to 40	..	..	..	..	..	2	..	1	..	2	..	1	..	1	..	2	5	..	..	8	..
40 to 45	..	..	..	..	..	1	..	..	..	1	..	1	..	1	..	3	1	..	..	4	..
45 to 50	..	..	..	..	..	1	..	1	..	1	..	3	..	3	..	3	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	1	..
55 to 60	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals..	338	8	701	363	18	1,368	33	756	7	1,368	33	631	13	631	13	1,129	532	4	982	17	..			
SOUTH-WESTERN HOSPITAL.																								
Under 1	3	..	4	..	..	7	..	6	..	7	..	3	..	3	..	8	1	..	..	7	..
1 to 2	12	..	25	1	1	30	1	14	1	30	1	17	2	17	2	45	5	..	..	38	1	
2 to 3	23	1	57	3	1	64	3	33	1	64	3	50	2	50	2	83	5	..	..	71	4	
3 to 4	38	..	70	2	2	102	3	53	3	102	3	53	2	53	2	108	4	..	..	105	5	
4 to 5	34	..	79	..	..	117	..	62	..	117	..	88	..	88	..	151	1	..	..	125	3
5 to 10	160	3	316	2	5	611	9	337	4	611	9	284	2	284	2	528	3	..	..	537	2	
10 to 15	50	..	127	..	..	254	..	134	..	254	..	139	1	139	1	231	2	..	..	256	2
15 to 20	27	..	54	..	..	60	..	31	..	60	..	24	..	24	..	43	..	..	..	73	1
20 to 25	6	..	12	..	..	31	..	22	..	31	..	13	..	13	..	29	..	..	..	31	..
25 to 30	6	..	22	..	..	17	..	13	..	17	..	14	1	14	1	20	1	..	..	21	..
30 to 35	3	..	6	..	..	13	..	9	..	13	..	6	..	6	..	11	..	..	..	8	..
35 to 40	3	..	6	..	..	6	..	3	..	6	..	1	..	1	..	1	..	..	..	1	..
40 to 45	1	..	3	..	..	5	..	2	1	5	..	..	..	..	..	1	..	..	..	3	..
45 to 50	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55 to 60	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	366	4	783	417	9	1,319	17	720	10	1,319	17	693	10	693	10	1,260	28	..	982	17	..			
BROOK HOSPITAL.																								
Under 1	7	..	1	..	..	8	..	6	..	8	..	3	..	3	..	16	4	..	..	7	..
1 to 2	38	..	1	..	..	45	..	14	1	45	..	17	2	17	2	83	5	..	..	38	1
2 to 3	71	..	2	..	..	108	..	33	1	108	..	50	2	50	2	151	4	..	..	71	4
3 to 4	105	..	3	..	..	188	..	53	3	188	..	53	2	53	2	258	3	..	..	105	5
4 to 5	125	..	3	..	..	258	..	62	..	258	..	88	..	88	..	528	1	..	..	125	3
5 to 10	256	..	2	..	..	231	..	337	4	231	..	284	2	284	2	43	2	..	..	256	2
10 to 15	73	..	1	..	..	43	..	134	..	43	..	139	1	139	1	29	..	..	..	73	1
15 to 20	31	..	..	..	..	29	..	31	..	29	..	24	..	24	..	15	..	..	..	31	..
20 to 25	21	..	..	..	..	20	..	22	..	20	..	13	..	13	..	13	..	..	..	21	..
25 to 30	8	..	..	..	..	11	..	13	..	11	..	14	1	14	1	7	..	..	..	8	..
30 to 35	1	..	..	..	..	1	..	6	..	1	..	6	..	6	..	1	..	..	..	1	..
35 to 40	3	..	..	..	..	2	..	3	..	2	..	1	..	1	..	1	..	..	..	3	..
40 to 45	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
45 to 50	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55 to 60	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	660	9	1,276	616	19	1,260	28	720	10	1,260	28	693	10	693	10	1,260	28	..	982	17	..			

AGES.	NORTHERN HOSPITAL.						SOUTHERN HOSPITAL.						SUMMARY.					
	Males.			Females.			Males.			Females.			Males.			Females.		
	Admitted.		Total.	Admitted.		Total.	Admitted.		Total.	Admitted.		Total.	Admitted.		Total.	Admitted.		Total.
	Died.	Trans-ferred cases.		Died.	Trans-ferred cases.		Died.	Trans-ferred cases.		Died.	Trans-ferred cases.		Died.	Trans-ferred cases.		Died.	Trans-ferred cases.	
Under 1	22	3	48	26	2	5
1 to 2	146	15	299	153	10	25
2 to 3	290	19	587	297	11	30
3 to 4	375	13	745	370	13	26
4 to 5	..	1	1	..	1	1	..	1	1	..	1	1	450	15	971	521	8	21
5 to 10	1	1	..	..	..	1,734	22	3,766	2,032	16	37
10 to 15	1	1	..	..	..	..	..	..	677	7	1,487	810	7	13
15 to 20	209	1	388	179	1	2
20 to 25	82	1	213	131	..	1
25 to 30	52	1	173	121	1	2
30 to 35	28	..	85	57	..	..
35 to 40	12	..	26	14	..	..
40 to 45	12	..	20	8	1	1
45 to 50	4	..	8	4	..	..
50 to 55	1	1	..	..
55 to 60	1	1	..	..
And upwards
Totals ..	1	..	1	1	..	2	..	2	..	..	..	..	4,093	97	8,818	4,725	70	163
													2	2	4			4

FEVER STATISTICS.—TABLE VI.—*Enteric fever admissions and deaths during 1911, divided according to age and sex.*

AGES.	EASTERN HOSPITAL.						NORTH-EASTERN HOSPITAL.						NORTH-WESTERN HOSPITAL.						WESTERN HOSPITAL.						SOUTH-WESTERN HOSPITAL.											
	Males.		Fe- males.		Total.		Males.		Fe- males.		Total.		Males.		Fe- males.		Total.		Males.		Fe- males.		Total.		Males.		Fe- males.		Total.		Males.		Fe- males.		Total.	
	Admitted.	Died.	Admitted.	Died.	Admitted.	Trans- ferred cases.	Admitted.	Died.	Admitted.	Died.	Admitted.	Trans- ferred cases.	Admitted.	Died.	Admitted.	Died.	Admitted.	Trans- ferred cases.	Admitted.	Died.	Admitted.	Died.	Admitted.	Trans- ferred cases.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Trans- ferred cases.				
Under 5	3	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5 to 10	8	..	6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
10 to 15	7	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15 to 20	9	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
20 to 25	6	..	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
25 to 30	5	..	6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
30 to 35	..	..	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
35 to 40	3	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
40 to 45	2	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
45 to 50	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55 to 60	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	44	5	36	4	80	9	..	15	4	15	2	30	6	..	35	5	35	4	70	9	..	..	..	..	..	..	..	..	..	..	..	..	..	..
SUMMARY.																																				
Under 5	6	..	..	..	..	..	..	11	..	7	1	18	..	..	11	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5 to 10	3	..	..	..	..	..	..	21	..	25	1	46	..	..	21	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
10 to 15	7	..	..	..	..	..	..	26	..	28	1	54	..	..	26	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15 to 20	10	..	..	..	..	..	..	32	..	19	4	51	..	..	32	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
20 to 25	6	1	4	..	10	1	..	26	7	26	7	52	14	..	26	7	52	14	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
25 to 30	7	2	4	1	11	4	..	19	6	19	5	44	11	..	19	6	44	11	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
30 to 35	6	1	1	4	7	6	..	25	3	17	1	36	6	..	25	3	36	6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
35 to 40	2	..	..	..	2	2	..	12	2	17	4	29	4	..	12	2	29	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
40 to 45	2	..	..	..	2	2	..	10	3	5	..	15	3	..	10	3	15	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
45 to 50	..	1	..	..	1	2	..	3	2	3	..	6	2	..	3	2	6	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	3	2	2	..	4	2	..	3	2	4	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55 to 60	..	..	..	..	..	..	..	2	..	1	..	4	1	..	2	..	4	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	51	5	27	3	78	8	..	190	28	170	26	360	54	..	190	28	170	26	360	54	..	..	..	..	..	..	..	..	..	..	..	..	..	..

ANNUAL REPORT, 1911,
FEVER STATISTICS.—TABLE VII.

Measles admissions and deaths during 1911, divided according to age and sex.

AGES.	EASTERN HOSPITAL.						NORTH-EASTERN HOSPITAL.						NORTH-WESTERN HOSPITAL.						WESTERN HOSPITAL.						SOUTH-WESTERN HOSPITAL.																																			
	Males.			Fe- males.			Total.			Males.			Fe- males.			Total.			Males.			Fe- males.			Total.			Males.			Females.			Total.																										
	Admitted.		Died.	Direct admis- sions.		Trans- ferred cases.	Admitted.		Died.	Direct admis- sions.		Trans- ferred cases.	Admitted.		Died.	Direct admis- sions.		Trans- ferred cases.	Admitted.		Died.	Direct admis- sions.		Trans- ferred cases.	Admitted.		Died.	Direct admis- sions.		Trans- ferred cases.	Admitted.		Died.	Direct admis- sions.		Trans- ferred cases.																								
	Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.		Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	Admitted.	Died.															
Under 1	24	7	14	7	40	..	12	3	26	8	5	52	13	..	39	11	..	13	13	18	5	21	6	39	6	21	1	28	41	3	28	2	13	1	..	..																						
1 to 2	77	33	64	31	150	..	60	8	72	13	12	122	25	..	77	13	..	47	13	45	7	32	6	77	6	32	9	43	90	17	47	8	47	9	..	..																						
2 to 3	75	18	36	18	141	..	38	6	50	5	8	100	13	..	65	5	..	42	13	36	3	29	4	65	4	35	5	47	89	8	3	5	42	5	..	..																						
3 to 4	68	10	18	8	127	..	28	2	44	6	6	84	11	..	68	3	..	33	11	33	4	35	1	68	1	21	4	17	45	8	5	28	3	28	3	..	..																					
4 to 5	47	3	11	5	99	..	15	1	39	1	1	88	2	..	48	3	..	27	2	27	1	2	2	48	2	46	4	32	60	9	4	28	5	28	5	..	..																					
5 to 10	61	2	6	4	144	..	12	..	55	1	2	111	3	..	87	1	..	41	3	41	..	1	1	87	1	46	1	57	100	4	1	43	3	43	3	..	..																					
10 to 15	8	..	..	..	12	..	1	..	3	..	..	3	..	..	7	..	..	4	..	4	..	3	..	7	..	3	..	4	5	1	..	6	1	6	1	..	..																					
15 to 20	2	..	..	..	3	..	1	..	1	..	..	1	..	..	1	..	..	1	..	1	..	2	..	1	..	..	..	..	..	..	..	4	..	..	..	..	..																		
20 to 25	..	..	..	..	1	..	1	..	2	..	..	4	..	..	3	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..										
25 to 30	1	..	..	..	2	..	..	..	1	..	..	1	..	..	1	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..											
30 to 35	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
35 to 40	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
40 to 45	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
45 to 50	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55 to 60	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	364	73	149	76	720	..	168	20	273	33	293	34	566	67	..	206	40	..	206	20	193	20	399	40	..	211	27	229	23	440	50	..	..	..	..	..																			
																															NORTHERN HOSPITAL.						BROOK HOSPITAL.						SOUTH-EASTERN HOSPITAL.						GROVE HOSPITAL.						SUMMARY.					
Under 1	2	..	..	..	3	..	38	13	23	9	15	4	38	13	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
1 to 2	10	4	6	7	17	..	99	18	42	8	39	10	81	18	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2 to 3	14	1	2	8	22	..	63	6	33	5	25	3	58	8	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3 to 4	9	1	1	6	15	..	59	2	29	3	34	3	63	6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
4 to 5	1	1	2	8	9	..	54	4	29	3	29	2	58	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5 to 10	7	..	..	6	13	..	57	2	31	2	56	1	87	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
10 to 15	..	..	..	..	..	..	2	..	3	..	9	..	12	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15 to 20	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
20 to 25	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
25 to 30	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
30 to 35	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
35 to 40	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
40 to 45	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
45 to 50	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55 to 60	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	43	7	11	36	4	79	45	181	1191	30	208	23	399	53	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

FEVER STATISTICS.—TABLE VIII.—*Whooping cough admissions and deaths during 1911, divided according to age and sex.*

[illegible]

FEVER STATISTICS.—TABLE IX.—*Cerebro-spinal meningitis admissions and deaths during 1911, divided according to age and sex.*

AGES.				EASTERN HOSPITAL.						WESTERN HOSPITAL.							
				Males.		Females.		Total.		Males.		Females.		Total.			
				Admitted.	Died.	Admitted.	Died.	Admitted.	Died.		Admitted.	Died.	Admitted.	Died.	Admitted.	Died.	
									Direct admissions.	Transferred cases.						Direct admissions.	Transferred cases.
Under 5	..	..	..	1	..	1	..	..	1	1	..	..	1	1	..
5 to 10	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..
10 to 15	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15 to 20	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
20 to 25	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
25 to 30	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
30 to 35	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
35 to 40	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
40 to 45	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
45 to 50	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55 to 60	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	..	..	..	1	..	1	..	..	1	1	..	..	1	1	..

				GROVE HOSPITAL.						SOUTH-EASTERN HOSPITAL.								
Under 5	1	1	1	1	..	1	..	..	..	1	..	..
5 to 10	
10 to 15	
15 to 20	
20 to 25	
25 to 30	
30 to 35	
35 to 40	
40 to 45	
45 to 50	
50 to 55	
55 to 60	
And upwards	
Total	1	1	1	1	..	1	..	..	..	1	..	..

				BROOK HOSPITAL.						SUMMARY.									
Under 5	..	..	..	1	..	..	..	1	..	..	2	..	2	1	4	1	..
5 to 10	..	..	..	..	..	..	..	..	..	..	1	1	..	..	1	1	..
10 to 15	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
15 to 20	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
20 to 25	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
25 to 30	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
30 to 35	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
35 to 40	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
40 to 45	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
45 to 50	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
50 to 55	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
55 to 60	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
And upwards	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total	..	..	..	1	..	..	..	1	..	..	3	1	2	1	5	2	..

F.

REPORT OF THE MEDICAL SUPERINTENDENT OF
THE SMALLPOX HOSPITALS FOR THE YEAR 1911.

No. 11.

JOYCE GREEN HOSPITAL.

DARTFORD,

KENT,

29th February, 1912.

Statistics. The total number of smallpox cases admitted during 1911 was 70, of whom 11 died. The main cause of this small outbreak was an unrecognised case of smallpox admitted to one of the East End of London infirmaries, many of the inmates being infected, also some of the staff, and of the latter one nurse died.

Non-smallpox cases. 21 non-smallpox cases were examined at South Wharf and found to be suffering from the following diseases :—

Varicella	...	...	...	...	9
Ulcer of leg	...	...	...	...	1
Herpes ...	...	...	...	...	1
Rötheln ...	...	...	...	...	1
Psoriasis	...	...	...	...	1
Urticaria	...	...	...	...	2
Purpura Hæmorrhagica	...	...	...	...	1
Erythema	...	...	...	...	1
Erythema and tuberculosis	...	...	...	...	1
Vaccinia	...	...	...	...	1
Measles ...	...	...	...	...	1
Bronchitis and pneumonia	...	...	...	...	1 died at South Wharf.

Staff illness. The only infectious disease which occurred amongst the staff was rötheln, of which there were 4 cases ; and all these made satisfactory recoveries.

During the last quarter of the year the Smallpox Hospitals were without the services of the medical superintendent, owing to the illness of Dr. Ricketts throughout this period. Dr. Ricketts is now on sick leave, and I am glad to hear that he is making steady progress towards recovery.

(Signed) ELIOT SWAINSTON,

Acting medical superintendent.

2011
2012
2013

APPENDIX II.—IMBECILITY.

A.

REPORTS OF THE MEDICAL SUPERINTENDENTS
OF THE IMBECILE ASYLUMS FOR THE YEAR 1911.

No. 1.

TOOTING BEC ASYLUM.

Statistics. The following is a brief summary of the statistics for the year 1911 :—

	Males.	Females.	Total.
Remaining on the 1st January, 1911 ..	434	569	1,003
Admitted during the year	277	348	625
Discharged to other asylums of the Board	87	181	268
Discharged to asylums not under the Board	15	8	23
Discharged recovered	4	—	4
Discharged not improved	25	16	41
Died	150	152	302

Admissions. In the admissions for 1911, the large majority of cases are those of senile decay, and there is no improvement in the type of patient sent to this asylum.

Deaths. During the year the deaths have numbered 302. The percentage of those resident on the male side is 34·7, and on the female side 26·8. Post-mortem examinations have been made in 279 cases. The average age of those dying on the male side is 69, and on the female side 75.

Out of the total number of deaths, 119 patients have been resident less than twelve months—67 males and 52 females.

Amongst the main causes of death may be enumerated the following :—

Pneumonia	11
Cancer	4
Phthisis	8
General paralysis	8
Chronic heart disease	17
Senile decay	219

Inquests. Two inquests were held during the year, and both verdicts were in accordance with the medical evidence.

Restraint and seclusion. No restraint has been employed during the year. One male has been secluded on two occasions for a total of 9½ hours, and six females on 31 occasions for a total of 111½ hours.

ANNUAL REPORT, 1911,

Visit of Commissioners in Lunacy. One of the Commissioners in Lunacy visited the asylum on the 21st March, and his report will be found on reference to the index.

I am pleased to be able to report that the general conduct of the staff during the year has been excellent.

RECEIVING HOME FOR CHILDREN.

		Males.	Females.	Total.
Statistics.	Remaining on 1st January, 1911	24	16	40
	Admitted during the year ..	109	91	200
	Discharged not improved ..	2	2	4
	Transferred	84	88	172
	Died	1	1	2

Medical statistics. I again submit the tables drawn up by the Medico-Psychological Association, which should prove very interesting and of great value.

(Signed) E. H. BERESFORD,
Medical Superintendent.

No. 2.

LEAVESDEN ASYLUM.

I beg to submit to you the Annual Report for the year ended 31st December, 1911.

Statistics.

		M.	F.	T.
On 1st January, 1911, the Asylum contained	..	902	1068	1970
Admitted during the year	.. ..	121	167	288
Died during the year	.. .. .	49	95	144
Discharged during the year	.. .. .	15	24	39
Remaining in the Asylum on 31st December, 1911		959	1116	2075
Vacancies in the Asylum on 31st December, 1911		21	68	89

Admissions. All the admissions were transfers either from sister Metropolitan Asylums or from London County Council Asylums. Very few were capable of doing work of any kind, and on the female side especially the infirm cases have greatly increased, so that the conversion of No. 15 block into three infirmary wards, together with the necessary increase of staff, is again urged. For many years now hope has been held out that able-bodied working patients, in sufficient numbers, will some day arrive, but this hope does not seem likely to be fulfilled.

Discharges. The discharges numbered 39. Of these 10 were discharged to the Guardians, 5 were transferred to sister Metropolitan Asylums, and 24 were sent to London City and County Asylums, as dangerous to themselves or others.

Deaths. The deaths numbered 144 ; 49 males and 95 females. There were 141 post-mortem examinations, this representing 97·9 per cent. of the deaths.

The following table gives the particulars as to the tubercular death rate during the last 14 years.

							Tubercular Per- centages on average			
Year.	Average number of patients resident.		Deaths from all causes.		Percentage of Post-mortems.		Tubercular Deaths.	number of patients resident		
1898	..	1986	..	194	..	32·5	..	55	..	2·76
1899	..	1952	..	250	..	52·2	..	73	..	3·74
1900	..	1905	..	310	..	84·0	..	104	..	5·46
1901	..	1772	..	164	..	90·0	..	67	..	3·78
1902	..	1768	..	134	..	94·0	..	43	..	2·38
1903	..	1752	..	131	..	96·0	..	34	..	1·94
1904	..	1751	..	158	..	94·0	..	53	..	3·02
1905	..	1776	..	126	..	90·5	..	44	..	2·47
1906	..	1782	..	127	..	97·0	..	40	..	2·24
1907	..	1819	..	151	..	95·3	..	37	..	2·03
1908	..	1920	..	156	..	98·0	..	39	..	2·03
1909	..	2069	..	210	..	97·6	..	70	..	3·38
1910	..	1911	..	120	..	97·5	..	31	..	1·62
1911	...	2049	...	144	...	97·9	...	38	...	1·85

Among the other chief causes of death were senile decay (17), pneumonia (10), epilepsy (13), valvular disease of heart (7), cerebral softening (7), and general paralysis of the insane (6).

Accidents and Inquests. There were 18 non-fatal accidents during the year, involving fractures of bone or other serious injury. Full reports were laid before the Sub-Committee respecting each of these cases, and there is nothing worthy of special report here. There was no inquest during the year, but on 31st December, an old patient, who had accidentally sustained a fracture of the thigh bone on 28th July, died, and upon her an inquest is to be held in the new year.

* * * * *

General Remarks. A Commissioner in Lunacy visited on 16th June and a Factory Inspector on 30th November. The new patients' dietary gives greater variety and satisfaction to the patients and is more economical than the previous one. A nurse and a female patient belonging to No. 7 block had enteric fever and recovered. It will be remembered that at the end of 1910 there were three male patients, belonging to 6b ward, recovering from enteric fever. During 1911, 5 patients and 1 attendant from the same ward, fell ill of the same disease, 2 of the patients dying of it. In the case of one of the patients, he had had the same disease in the autumn of 1910—such a recurrence is rare. At the end of the year there were retained in isolation one male patient recovering from enteric fever, and two male so called "carriers." Examination by the Widal blood test of all male and female wet and dirty cases and further examinations of the fæces and urine of certain patients are being undertaken by Dr. Cartwright Wood.

One assistant medical officer had scarlet fever. There have been 34 cases of diarrhœa among the patients and staff during the year, of which 15 appeared to be very mild cases of dysentery. In only one old man was dysentery a contributory cause of death. Influenza affected 35 of the staff, but the patients were unaffected. On 31st December, 1911, there were 111 cases under segregation and treatment for ophthalmia of various kinds. On the female side the trachomas (34) have been separated from the other ophthalmia cases (42), but on the male side the two classes of cases (11 and 24 respectively) are still treated in the same ward. It is to be hoped that at an early date other arrangements will be made to separate these groups, which ought not to be housed in one ward. Dr. Macnab, the ophthalmic surgeon, continues to visit monthly, performing necessary operations and directing the treatment. 11 patients (5 males and 6 females) had erysipelas during the year. The separate ward for 18 of the worst male tubercular patients has been a great boon, and it is recommended that similar accommodation, though larger, should be provided for the female side.

There has been no necessity during 1911 to use seclusion by day or night, mechanical restraint or strong dresses in the treatment of the patients.

* * * * *

(Signed) FRANK ASHBY ELKINS, M.D.,
Medical Superintendent.

No. 3.

CATERHAM ASYLUM.

I have the honour to present the annual report of this Asylum for the year 1911, with the usual statistical tables.

The changes in the population which have taken place are indicated in the following tabulated statement:—

	Males.	Females.	Total.
On the register 1st January, 1911 ...	942	1,117	2,059
Admissions—			
Indirect	68	20	88
Transfers	49	63	112
Total under treatment	1,059	1,200	2,259
Discharged or transferred	16	6	22
Died	96	90	186
On the register 31st Dec., 1911 ...	947	1,104	2,051

Admissions. Of the 200 patients admitted 80 were congenital cases, the remaining 120 being those in which the insanity occurred later in life, the majority being chronic lunatics. The mental and bodily condition of most of them could only be described as unsatisfactory, and, with but very few exceptions, was there a prospect of any being able to render even slight assistance in the general work of the asylum. Although a large proportion were of extremely faulty habits when received, it is gratifying to be able to report that the efforts of the staff have been productive of marked improvement in this respect.

Discharges. 22 patients, 16 male and 6 female, were discharged during the year. Of these 3 men were discharged as recovered, 11 men and 3 women having become dangerous to themselves or others were re-certified and removed to County Asylums, and those relieved were discharged to the care of friends or relatives on their urgent and often repeated request. Such applications should, in my opinion, be most carefully considered before assent is given, as in several instances after removal, contrary to advice, I have received letters regretting the step taken, or have heard of the patients being re-admitted to an asylum.

Deaths. 186 patients, 96 men and 90 women, died during the year, the death rate calculated on the average number resident being 9 per cent.—male 10 per cent., female 8 per cent. The cause of death was verified by post-mortem examination in 152 instances, the consent of relatives being withheld in most of the other cases. As a principal or contributory cause, diseases of the respiratory system were more than usually common, 31 men and 16 women dying of pneumonia, and 13 men and 8 women from pulmonary tuberculosis. The certified cause of death in the case of 7 men and 5 women was ulcerative colitis, this being an increase of 4 on last year's return.

Administrative history. The sanitary condition of the asylum and the health of both patients and staff has been generally satisfactory.

Early in the year a nurse, who had not been many weeks in residence, and 8 female patients were under treatment in the Isolation Hospital for enteric fever. Though in a few instances the illness was protracted, all recovered. Towards the end of October, owing to somewhat suspicious febrile symptoms, the blood of 3 female patients was sent to Belmont Laboratory for Widal examination, and as the report was positive, they were notified and treated for the complaint; the attack in each case was mild and all did well.

During the past year the number of patients under treatment for diarrhœa, in many cases dysenteric in character, continued to be high, and as there was also an increase, as compared with previous years, in the number of those who succumbed to colitis, I felt it my duty, after careful and anxious consideration, to submit a special report to the sub-committee on the subject.

On July 1st, in accordance with the revised scale for asylum patients, a new dietary was introduced. As it enables me to arrange for variations, specially as regards dinner, the change has given general satisfaction and has been greatly appreciated. On a comparison being made between the first three months it was in force here and the previous quarter, it was found that a considerable saving had been effected.

Among structural alterations and improvements carried out or contemplated might be mentioned:—The provision of additional W.C. accommodation and more modern sanitary arrangements in male F. Block on conversion into three infirmary floors; the fixing of glazed panels in the outer doors of the stores, bakehouse, and general kitchen; the installation of a new engine for driving the laundry machinery, and an additional and more powerful duplex pump, for lifting the water from the reservoir to the tower. Two new washing machines are to replace old ones, which have been in use since the opening of the asylum, and by the provision of a new callender and uncourse ironer, it is anticipated that there will be a marked and much needed improvement in the state of the clothing sent out from the laundry.

* * * * *

(Signed) P. E. CAMPBELL, M.B.,
Medical Superintendent.

No. 4.

DARENTH ASYLUM.

ANNUAL REPORT OF THE MEDICAL SUPERINTENDENT
FOR THE YEAR 1911.

Statistics.

		Males.	Females.	Total.
On January 1st, 1911, the asylum contained ...	...	1128	842	1970
Admitted during the year ...	...	111	124	235
Total number under treatment during the year ...	...	1239	966	2205
Discharged during the year ...	...	43	44	87
Died during the year ...	...	25	24	49
Remaining in the asylum on December 31st, 1911 ...	...	1171	898	2069

Admissions. 108 males and 124 females were received from Tooting Bec Asylum, 2 males from Leavesden Asylum, and 1 male from Bridge Industrial Home.

Discharges. 87 patients were discharged during the year.

1 recovered.
20 to care of friends.
1 to the Stockton Workhouse.
31 to Leavesden Asylum.
34 to Caterham Asylum.
—
87
—

Deaths. During the year there were only 49 deaths. This is the lowest on record at this Asylum. No inquests were held.

General health. The general health of the patients was good, except that in January and February there were 8 cases of scarlet fever (5 males and 3 females).

Farm. On the year's working there was a favourable balance of £894 0s. 8d.

* * * * *

Staff. There being a vacancy for the post of matron, I obtained the sanction of the Managers to alter the method of administration, so that in future those parts of the institution, *i.e.*, the training school and the female side of the industrial colony and pavilions, which had been under two principal officers, should be placed under one matron. Accordingly Miss Ferrier was appointed sole matron, and she now has working under her two assistant matrons, and four female head attendants.

The main objects of this change are :—

- (1). That the whole of the female department can be run under one system, which was impossible with two heads of the departments.
- (2). That the nursing and domestic staff can be used to relieve one another in any part of the institution, and
- (3). That generally the whole institution should be amalgamated properly, which, up till now, has not been the case.

The school teaching will, in future, be in charge of a head teacher.

Inspections. On the 8th July an inspection of the institution by the whole Board was held, when there was a large attendance of Managers, including the Chairman and Vice-Chairman of the Board, the Chairman and Vice-Chairman of the Asylums Committee, and the Chairman of the Sub-Committee, together with the Clerk to the Board. Sir Arthur Downes and the Chairman of the London County Council were also present.

On the 22nd May a Committee of the Medico-Psychological Association visited and inspected the institution, and the following are short extracts taken from a long report (*vide* the Journal of Mental Science, October, 1911), made by them after their visit :—

“ The question naturally arose when so much excellent work was seen. Could that worker make his living outside ? The answer was in the negative, for though the work is so good it is executed too slowly to allow of the worker competing with the sane ; and further, the work is only done so well because it is done under close and competent supervision of the master. Beyond these, of course, is the question of temper and power to look after individual interests. But on the score of industry and cheerfulness at work the inmates at Darenth can set an example to all outside. Nothing struck the Committee more than the eagerness to work with a smiling face. The Committee found both from report and from personal conversation with some of the workers that they preferred to work rather than to play or watch cricket, etc.”

“ The general conclusions of the Committee were that there is an amount of beneficial work done for the imbeciles at Darenth that is not generally known, one might say suspected. If it were more in evidence there can be no doubt that much scepticism and hopelessness now shown as to any possible good being done by special institutions would be swept away. What the Committee saw done by low brain power cannot but lead to the opinion that such institutions are an actual necessity, and would be successful in remedying pernicious idleness which is the only lot of imbeciles without such opportunities being given. In any circumstances the detention and maintenance of imbeciles must be costly. Darenth shows one way, and apparently the best, of lowering the cost, not only by the profit that can be made on the work, but by substituting happiness and ease of management for the reverse.”

Industrial colony.

The following shows how the patients over 16 years of age are usefully employed :—

<i>Industry.</i>	<i>Male.</i>	<i>Female.</i>
Ward work	111	92
Kitchens	8	8
Tailors	42	—
Shoemakers	51	—
Upholsterers	34	—
Basketmaking	21	—
Mat and rug making	32	6
Brush making	45	30
Wood chopping	34	—
Painters	13	—
Carpenters	23	—
Tinsmiths	14	—
Bookbinders	24	—
Printers	10	—
Stokers	2	—
Stores	5	—
Farm and garden	38	—
Carts	20	—
Odd jobs	41	—
Bricklayer	1	—
Road makers	9	—
Needlework	—	303
Laundries	—	66
Mattress makers	—	15
Bag and envelope makers	—	22
Learners, needlework	—	18
	—	—
	578	560
	—	—

WORKROOMS FOR FEMALES.

In June, after very considerable delay in building, the new female workshops were taken over. These shops have proved to be admirable in every way for their purpose ; the light is extremely good, the ventilation is ample, and besides being quite warm enough in winter, they remained fresh and fairly cool during the extreme heat of last summer.

Below will be found some remarks concerning the different industries :—

Large needleroom, in which only work for other institutions is undertaken.—In this room 129 patients are employed, of whom 45 are capable of working the treadle sewing machines, while 4 are busily engaged in stocking and sock making. In all 13,901 articles were made and sent away, and 2,059 pairs of stockings and socks were knitted.

Room in which all new clothing for Darenth is prepared.—47 patients work under an assistant sempstress, and turned out 4,518 articles of clothing, including 107 uniform dresses. These patients do the work formerly done in the needle-room at the schools, where paid assistant sempstresses were employed. Five girls work treadle sewing machines.

Needleroom for repairs.—127 patients of somewhat worse mental capacity did the whole of the institution repairs, and, in addition, completed 4,725 new articles of clothing. The repairs totalled 78,331. 458 pairs of hose were re-footed, and 40 jerseys were re-sleeved. 12 patients are capable of working treadle sewing machines, and to show the general improvement, it is interesting to note

that in this room 18 patients were taught the sewing machine, 3 the stocking machine, 3 the darning machine, 30 to herring-bone, 24 to make button-holes, and 6 to darn.

The staff in these three rooms consists of 1 head sempstress, 1 assistant sempstress, and 8 industrial attendants, and they are in charge of 303 patients.

Brush-making shop.—There are now 35 patients employed as against 31 in 1910, and their output for the year consisted of 11 rugs, 21 smaller mats, and 12,212 brushes, which are sent to the boys' shop for completion. The room they now occupy is much larger and brighter in every way than their former one, a change which is much appreciated.

Mattress shop.—4 new patients have been taught mattress making and 2 to use the sewing machine. A new industry, *i.e.*, upholstering work, has been started in this room, and should prove a suitable occupation for the girls.

Bag, cardboard box, and envelope-making room.—34 patients are employed fulfilling orders for envelopes, paper bags, cardboard boxes, labels, as they are required. The girls have become most expert at this work, and one girl is capable of making 600 paper bags a day. Envelope and label making are new industries. Output for the year, 290,200 paper bags, 1,850 envelopes, 500 labels, and 96 cardboard boxes. In addition to the above, a few patients are taught the first principles of sewing, and during the year 17 became expert enough to be transferred to the repairing room.

Each of these shops is in charge of one industrial attendant.

WORKSHOPS FOR MALES.

Further alterations and additions have been made to the male workshops since my last report. The old fire station has been absorbed into the adjoining shop (a new fire station being built) forming a room 60 feet long by 18 feet wide, which makes a fine bookbinder's shop, and enables the printer to have a room of his own; a great improvement. A small wood store has been constructed, and in the near future it is hoped to enlarge the present carpenter's shop. As the work increases it is necessary to utilise every available space for enlargement.

Tailor's shop.—Very creditable work is still being done, the following being the result of the year's work :—

Articles of patients' clothing made	..	..	..	667
Articles of staff uniform made	..	..	..	180
Other articles	..	..	..	780
Articles of clothing repaired	..	..	..	13,144
Uniform repaired	..	..	..	241

Upholsterer's shop.—The value of goods disposed of and repairs done in this shop was £2,669 5s. 2d., and consists of :—

Chairs, etc., re-upholstered	..	..	..	..	220
Mattresses, etc., re-made	..	..	..	..	3,076
New mattresses, pillows, etc.	..	..	..	..	2,728
New ticks..	..	..	..	..	3,209
Other articles	..	..	..	..	435
Hair carded	..	..	..	..	89,040 lbs.

Shoemaker's shop.—Through want of space there is some over-crowding in this shop, and during next year I hope we shall be able to have two shops, one for new work and one for repairs. Value of work done £874 3s. 3d.

Basket-making shop.—Improvement still continues in the work done, but as in the case of the shoemaker's shop, further accommodation is needed. The year's output consisted of:—

Baskets made	..	..	..	..	..	..	913
Chairs made	..	..	..	..	..	..	49
String nets	..	..	..	..	..	..	65
Chair screen	..	..	..	..	..	..	1
Baskets repaired	..	..	..	..	..	..	334
Chairs repaired	..	..	..	..	..	..	233

Mat-making shop.—The patients are still improving in the way they make their mats, both in shape and finish, and they have turned out:—

Coir mats	..	..	..	..	..	..	749
Rugs	..	..	..	..	..	..	41
Kneelers	..	..	..	..	..	..	350
Mops	..	..	..	..	..	..	340
Fendoffs	..	..	..	..	..	..	6
Repairs	..	..	..	..	..	..	39

Carpenter's shop.—Some of the best boys in the colony are employed in this industry, and the work they do is very remarkable. Unfortunately during the year one of the best patients died, and it will take some time to replace him.

I am glad to be able to report that one lad who had been doing excellent work in this shop was discharged, and is now, I believe, earning good wages at cabinet making.

Articles made	..	..	..	..	..	..	3,588
Articles repaired	..	..	..	..	..	..	38

The whole of the equipment for the new female workshops was constructed by the carpenter patients.

Bookbinder's shop.

Official books bound	..	..	..	..	..	..	904
Manuscript books made	..	..	..	..	..	..	6,932
Paper bags	..	..	..	..	..	..	190,352
Envelopes	..	..	..	..	..	..	166,400
Other articles	..	..	..	..	..	..	1,364

Brushmaker's shop.—Progress continues to be made and less complaints received. 30,771 brushes have been made, of a total value of £1,221 3s. 1d., as compared with articles to the value of £970 5s. 11d in 1910.

Painter.—The patients working with the painter have done work to the value of £194 18s. 9d., and have proved themselves to be extremely useful in doing various jobs about the institution, and in varnishing and polishing articles of furniture made in the carpenter's shop.

Wood-chopping.—Though this shop was closed for 19 weeks during the year, yet the output exceeded that of last year.

211,428 bundles of wood were made up.

1,199 sacks of loose firewood were issued.

85 tons log-wood were cut up and distributed to the various wards.

Printer's shop.—This industry was commenced in March, and it has proved a great success. The progress made by the patients being extremely good. The whole of the composing is done by the boys themselves, and they are able to set up the type quicker than the copies can be printed on our two machines, and I think it will soon be necessary to obtain more machines. Of the two machines at present in use one is worked by power and the other by patients' labour, and there is plenty of room and power for two further machines. Since March 562,460 forms have been printed.

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During the year, apart from goods despatched by rail and private vans, 143 loads were conveyed to the Central Stores and other institutions.

The patients are contented and happy at their various trades and take a great interest in their work, as also do the industrial trainers.

Profit and loss account for the year ended Michaelmas, 1911 :—

<i>Dr.</i>	NEEDLEROOM ACCOUNT.			<i>Cr.</i>		
	£	s.	d.	£	s.	d.
Value of stock brought forward	1,342	5	3	Value of goods and repairs		
„ „ new stock	5,003	16	8	disposed of	3,926	7 2
Wages and rations	174	9	1	Value of stock in hand ..	2,795	8 4
Balance	201	4	6			
	<hr/>				<hr/>	
	£6,721	15	6		£6,721	15 6
	<hr/>				<hr/>	
215,729 hours of patients' labour not charged.						

<i>Dr.</i>	TAILOR'S ACCOUNT.			<i>Cr.</i>		
	£	s.	d.	£	s.	d.
Value of stock brought forward	198	19	1	Value of repairs and goods		
„ „ new stock	158	1	2	disposed of	814	2 0
Wages and rations	65	6	1	Value of stock in hand ..	130	18 3
Balance	522	13	11			
	<hr/>				<hr/>	
	£945	0	3		£945	0 3
	<hr/>				<hr/>	
75,000 hours of patients' labour not charged.						

<i>Dr.</i>	SHOEMAKER'S ACCOUNT.					<i>Cr.</i>	
	£	s.	d.		£	s.	d.
Value of stock brought forward	30	0	0	Value of repairs and goods			
„ „ new stock	547	14	8	disposed of	874	3	3
Wages and rations	130	1	10	Value of stock in hand ..	93	18	0
Balance	260	4	9				
	<u>£968</u>	<u>1</u>	<u>3</u>		<u>£968</u>	<u>1</u>	<u>3</u>
81,346 hours of patients' labour not charged.							

<i>Dr.</i>	UPHOLSTERER'S ACCOUNT.			<i>Cr.</i>		
	£	s.	d.	£	s.	d.
Value of stock brought forward	652	4	10	Value of repairs and goods		
„ „ new stock	1,803	7	0	disposed of	2,669	5 2
Wages and rations	151	8	2	Value of stock in hand ..	510	16 3
Balance	573	1	5			
	<u>£3,180</u>	<u>1</u>	<u>5</u>		<u>£3,180</u>	<u>1 5</u>
53,048 hours of patients' labour not charged.						

STATISTICAL COMMITTEE.

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Dr.

BRUSH ACCOUNT.

Cr.

	£	s.	d.
Value of stock brought forward	897	17	1
„ „ new stock	1,080	13	10
Wages and rations	85	18	2
Balance	234	6	10
	<u>£2,298 15 11</u>		
74,545 hours of patients' labour not charged.			

	£	s.	d.
Value of goods disposed of, ..	1,221	3	1
„ „ stock in hand ..	1,077	12	10
	<u>£2,298 15 11</u>		

Dr.

BASKET ACCOUNT.

Cr.

	£	s.	d.
Value of stock brought forward	219	6	11
„ „ new stock	214	17	2
Wages and rations	43	18	8
Balance	117	1	8
	<u>£595 4 5</u>		
36,797½ hours of patients' labour not charged.			

	£	s.	d.
Value of repairs and goods disposed of	369	19	6
Value of stock in hand ..	225	4	11
	<u>£595 4 5</u>		

Dr.

WOODCHOPPING ACCOUNT.

Cr.

	£	s.	d.
Value of stock brought forward	556	13	9
„ „ new stock	24	10	4
Wages and rations	45	2	1
Balance	152	11	2
	<u>£778 17 4</u>		
60,214½ hours of patients' labour not charged.			

	£	s.	d.
Value of goods disposed of ..	491	2	1
„ „ stock in hand ..	287	15	3
	<u>£778 17 4</u>		

Dr.

MAT ACCOUNT.

Cr.

	£	s.	d.
Value of stock brought forward	166	9	11
„ „ new stock	156	12	9
Wages and rations	42	0	1
Balance	58	10	7
	<u>£423 13 4</u>		
49,801 hours of patients' labour not charged.			

	£	s.	d.
Value of repairs and goods disposed of	221	5	0
Value of stock in hand ..	202	8	4
	<u>£423 13 4</u>		

Dr.

TINSMITH'S ACCOUNT.

Cr.

	£	s.	d.
Value of stock brought forward	68	5	1
„ „ new stock	77	10	2
Wages and rations	28	15	11
Balance	52	17	1
	<u>£227 8 3</u>		
21,790½ hours of patients' labour not charged.			

	£	s.	d.
Value of repairs and goods disposed of	110	18	8
Value of stock in hand ..	116	9	7
	<u>£227 8 3</u>		

<i>Dr.</i>		PAINTER'S ACCOUNT.			<i>Cr.</i>	
		£	s.	d.		£ s. d.
Value of stock brought forward		31	6	5	Value of work done and goods disposed of	194 18 9
„ „ new stock		62	13	9	Value of stock in hand ..	35 4 10
Wages and rations		53	11	11		
Balance		82	11	6		
		<u>£230 3 7</u>				<u>£230 3 7</u>
17,336 hours of patients' labour not charged.						

<i>Dr.</i>		CARPENTER'S ACCOUNT.			<i>Cr.</i>	
		£	s.	d.		£ s. d.
Value of stock brought forward		285	9	8	Value of repairs and goods disposed of	506 9 8
„ „ new stock		222	12	3	Value of stock in hand ..	348 0 10
Wages and rations		157	3	9		
Balance		189	4	10		
		<u>£854 10 6</u>				<u>£854 10 6</u>
43,391½ hours of patients' labour not charged.						

<i>Dr.</i>		BOOKBINDER'S ACCOUNT.			<i>Cr.</i>	
		£	s.	d.		£ s. d.
Value of stock brought forward		158	16	3	Value of goods disposed of ..	299 11 2
„ „ new stock		256	9	5	„ „ stock in hand ..	192 19 1
Wages and rations		45	12	8		
Balance		31	11	11		
		<u>£492 10 3</u>				<u>£492 10 3</u>
24,929 hours of patients' labour not charged.						

<i>Dr.</i>		PRINTER'S ACCOUNT.			<i>Cr.</i>	
		£	s.	d.		£ s. d.
Value of new stock		52	12	11	Value of goods disposed of ...	49 0 8
Value of wages and rations ...		17	4	2	„ „ stock in hand ...	23 12 3
Balance		2	15	10		
		<u>£72 12 11</u>				<u>£72 12 11</u>
6,269 hours patients' labour not charged.						

These totals do not include the rent or maintenance of the shops. A correct proportion of the craftsman's salary is included. The total profit on the account for the year was £2,478 16s. 0d.

Chaplain's report.—The Chaplain reports as follows:—The chapel services have been carried out as in former years. They do not call forth any special remark for the past year. There is a need for a service book adapted for the patients. It is hoped that the form of service, which has been approved by the Bishop of Rochester, will prove of greater utility than that which has hitherto been used. It is desirable that this “form,” which is to be printed at Darenth, will be ready for use in the near future.

The Bible Classes for adults are proving of great value in arousing interest in regard to the religious services. They are being modified so as to make them a means of preparation and of instruction for the Sunday services in the chapel.

Lantern services have been held during Advent and Lent. These have met with an encouraging response, arousing and stimulating interest among the patients. The lantern has also been used for the children. Several entertainments have been given in the schools hall, with the assistance of the teaching staff of the school.

A class for men, all of whom can read, has been formed for special religious instruction. Herein is the chief development of the religious work for the past year to be seen.

The Sunday school for children maintains its character as a stepping stone to the children's services. The seating accommodation of the hall is taxed to the utmost. The method of carrying on the school attracts the children, who still shew improvement in their response in the chapel services held for them.

The gramophone has proved of great service. It has helped largely to brighten the lives of the inmates on dull evenings. It has been used together with the pianos of the "homes" to provide "musical evenings" for the "Colonists" on many occasions during the past year.

He desires to thank the members of the staff who have kindly co-operated with him in his work.

Statistics for Training School.

	Males.	Females.	Total.
Number on school register on January 1st, 1911....	212	125	337
Number in shops on January 1st, 1911	78	30	108
Admitted during the year	48	34	82
Taken off register	51	45	96
Number on school register on December 31st, 1911	209	114	323
Number in shops on December 31st, 1911	90	30	120
Highest number attending school daily	197	109	306
Highest number attending shops daily	89	28	117

The following table shows the number and value of articles made and sold during the year 1911:—

No.	Industry.	No. of Articles.	£	s.	d.
1	Basket work	226	6	11	8
2	Macrame work	135	9	15	6
3	Paper flower work	2,145	12	9	1
4	Ornamental paper work	18	0	3	9
5	Cross stitch	21	0	11	9
6	Weaving	26	0	12	6
7	Knitting	35	3	11	3
8	Crochet	38	1	1	10
9	Fancy needlework	35	0	17	3
10	Stuffed toys	141	3	10	8
11	Teneriffe lace and drawn thread	28	1	10	0
12	Rug work	6	1	10	6
13	Wood work	5	0	10	10
14	Garden	400	1	4	0
15	Cane chair seating	6	0	6	0
Totals		3,265	£44	6	7

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Work for Institution not sold.

1	Plain needlework, schools 793, shops 364	...	1,157
2	Tailoring ... ..	...	54
3	Ironing ... ..	...	2,662
4	Cane-seating ... ..	...	5
Total			<hr/> 3,878 <hr/>

Alterations and improvements.—The following additions, alterations and repairs have been completed during the year :—

Repairs and laying new floor in printing shop.

Laying pitch pine flooring in wards 18, 19 and 20.

Re-laying sloping road at gasworks.

Re-laying paving at farm piggeries.

Annual painting and cleaning work.

Repairs to boundary fence.

Building new fire station.

Preparing for new boiler at training school.

(Signed) A. ROTHERHAM,
Medical Superintendent.

B.

TABLE A1.—General table, showing the movement of the asylum population during the year 1911.

	TOOTING BEC.										LEAVESDEN ASYLUM.						CATERHAM ASYLUM.						DARENTH ASYLUM.					
	ASYLUM.						RECEIVING HOME FOR CHILDREN.																					
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	
On the asylums' registers, Jan. 1st, 1911	434	569	1003	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total cases admitted during the year	277	348	625	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total cases under treatment during the year	..	..	..	711	917	1628	..	..	..	133	107	240	..	..	..	1023	1235	2258	..	..	..	1059	1200	2259	..	..	..
Cases discharged as transferred during the year as:																												
Not insane	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Recovered	4	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Relieved	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Not improved	112	197	309	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Died during the year	150	152	302	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total cases discharged, transferred, and died during the year	..	..	..	266	349	615	..	..	..	87	91	178	..	..	..	64	119	183	..	..	..	112	96	208	..	..	..
On the asylums' registers, Dec. 31st, 1911	..	..	..	445	568	1013	..	..	..	46	16	62	..	..	..	959	1116	2075	..	..	..	947	1104	2051	..	..	..
Average daily number on the Registers during the year	..	..	..	432	567	999	..	..	..	36	15	51	..	..	..	929	1131	2060	..	..	..	930	1106	2036	..	..	..
Certified persons (i.e. separate persons in contradistinction to "cases" which may include the same individual more than once):																												
Under care during year	711	916	1627	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Admitted	277	347	624	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Recovered	4	..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

TABLE A2.—GENERAL TABLE, *showing the movement of the ASYLUM POPULATION during each year since the year 1902, together with the* RECOVERY AND DEATH RATES.

YEAR.	ADMISSIONS.									Total number under treatment.			DISCHARGED OR TRANSFERRED.									DIED.			Remaining on registers December 31st in each year.			Average daily number on registers.			Percentage of total recoveries on the total number of admissions.			Percentage of total recoveries on the direct admissions.			Percentage of recoveries yielded by direct admissions on direct admissions.			Percentage of deaths on average numbers resident.				
	Direct.			Indirect.			Total.						Recovered.†			Relieved.			Not improved.																									
	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.	M.	F.	Tl.					
TOOTING BEC ASYLUM.																																												
1903	419	509	928	80	100	180	499	609	1,108	499	609	1,108	2	2	4	106	144	250	68	52	120	323	411	734	263	353	616	0.40	0.30	0.36	.40	.30	.40	.40	.30	.40	25.85	14.73	19.48		
1904	280	300	580	..	2	2	280	302	582	603	713	1,316	6	6	12	211	209	420	79	91	170	307	407	714	321	409	730	2.14	1.99	2.06	2.10	2.00	2.07	2.10	2.00	2.07	24.61	22.25	23.29		
1905	208	223	431	65	64	129	273	287	560	580	694	1,274	1	3	4	2	5	7	165	169	334	97	103	200	315	414	729	316	414	730	0.37	1.04	0.71	.30	1.10	.70	.30	1.10	.70	30.69	24.88	27.39		
1906	301	324	625	..	1	1	301	325	626	616	739	1,355	6	6	12	2	1	3	226	186	362	100	135	235	282	461	743	311	447	758	1.67	1.84	1.76	1.90	1.80	1.90	1.90	1.80	1.90	32.15	30.20	31.00		
1907	248	303	551	32	42	74	280	345	625	567	806	1,373	12	6	18	1	1	2	151	187	338	111	147	258	287	465	752	288	471	759	3.57	1.16	2.24	4.80	1.90	3.20	4.80	1.90	3.20	38.60	31.20	33.99		
1908	258	292	550	179	8	187	437	300	737	724	765	1,489	2	4	6	1	..	1	104	168	272	138	124	262	479	469	948	373	466	839	0.23	1.30	0.68	0.23	1.37	1.11	.80	1.14	1.09	37.00	26.61	31.23		
1909	238	291	529	10	12	22	248	303	551	727	772	1,499	7	7	14	1	..	1	134	106	240	155	137	292	430	522	952	460	497	957	2.43	2.31	2.36	2.53	2.41	2.46	2.53	2.06	2.27	33.70	27.56	30.51		
1910	239	265	504	38	8	46	277	273	550	707	795	1,502	7	7	14	125	111	236	141	108	249	434	569	1,003	456	547	1,003	2.16	2.20	2.18	2.51	2.26	2.38	2.51	2.26	2.38	30.92	19.74	24.83		
1911	248	338	586	29	10	39	277	348	625	711	917	1,628	4	..	4	112	197	309	150	152	302	445	568	1,013	432	567	999	1.44	..	0.64	1.61	..	0.68	1.61	..	0.68	34.72	26.81	30.23		
TOOTING BEC receiving home for children.																																												
1904	15	20	35	15	20	35	15	20	35	8	6	14	7	14	21	7	12	19	18.18	9.09	13.64		
1905	91	67	158	91	67	158	99	73	172	..	1	1	1	79	64	143	2	1	3	17	14	31	11	11	22	..	1.48	.63	..	1.48	.63	..	1.48	.63	..	18.18	10.00	14.28	
1906	90	68	158	90	68	158	107	82	189	2	..	2	92	76	168	2	1	3	11	5	16	11	10	21	1.11	..	.63	1.11	..	.63	1.11	..	.63	1.11	..	8.83	12.50	10.00
1907	129	77	206	129	77	206	140	82	222	120	67	187	1	1	2	19	14	33	12	8	20	5.56	7.14	6.25	
1908	144	104	248	2	..	2	146	104	250	165	118	283	142	99	241	1	1	2	22	18	40	18	14	32	17.65	23.57	22.58	
1909	132	78	210	132	78	210	154	96	250	2	1	3	129	75	204	3	4	7	20	16	36	17	14	31	27.27	19.74	24.83	
1910	119	80	199	119	80	199	139	96	235	..	1	1	109	77	186	6	2	8	24	16	40	22	17	39	2.78	6.66	3.92	
1911	108	91	199	1	..	1	109	91	200	133	107	240	2	3	5	86	90	176	1	1	2	46	16	62	36	15	51
LEAVESDEN ASYLUM.																																												
1902	66	49	115	19	42	61	85	91	176	896	1,047	1,943	2	1	3	2	..	2	20	17	37	60	74	134	812	955	1,767	815	953	1,768	2.4	1.1	1.7	3.0	2.0	2.6	7.3	7.7	7.5		
1903	14	3	17	54	72	126	68	75	143	880	1,030	1,910	1	2	3	6	4	10	6	7	13	64	67	131	803	950	1,753	805	947	1,752	1.5	2.7	2.1	7.1	66.6	17.6	7.9	7.1	7.5		
1904	101	104	205	101	104	205	904	1,054	1,958	1	4	5	4	2	6	5	15	20	82	76	158	812	957	1,769	806	945	1,751	1.0	3.8	2.4	10.2	8.0	9.0		
1905	94	118	212	94	118	212	906	1,075	1,981	3	10	13	8	12	20	21	25	46	65	61	126	809	967	1,776	812	964	1,776	3.2	8.5	6.1	8.0	6.3	7.1		
1906	98	87	185	98	87	185	907	1,054	1,961	10	3	13	14	12	26	65	62	127	818	977	1,795	819	963	1,782	7.9	6.4	7.1		
1907	91	191	282	91	191	282	909	1,168	2,077	4	3	7	16	46	62	58	93	151	831	1,026	1,857	819	998	1,817	7.0	9.3	8.3		
1908	218	255	473	218	255	473	1,049	1,281	2,330	*55	11	*66	65	91	156	929	1,179	2,108	864	1,056	1,920	7.5	8.6	8.1		
1909	75	80	155	75	80	155	1,004	1,259	2,263	1	..	1	26	25	51	90	120	210	887	1,114	2,001	919	1,150	2,069	9.8	10.4	10.1		
1910	116	64	180	116	64	180	1,003	1,178	2,181	1	..	1	40	50	90	60	60	120	902	1,068	1,970	849	1,062	1,911	7.2	5.9	6.3		
1911	121	167	288	121	167	288	1,023	1,235	2,258	2	3	5	13	21	34	49	95	144	959	1,116	2,075	929	1,131	2,069	5.3	8.4	7.0		
CATERHAM ASYLUM.																																												
1902	56	26	82	12	33	45	68	59	127	954	1,103	2,057	2	..	2	2	2	4	5	6	11	63	48	111	882	1,047	1,929	885	1,045	1,930	3.0	..	1.6	3.5	..	2.4	7.1	4.6	5.7		
1903	126	98	224	126	98	224	1,008	1,145	2,153	..	2	2	1	4	5	56	13	69	64	62	126	887	1,064	1,951	888	1,038	1,926	..	2.0	0.9	7.2	6.0	6.5		
1904	53	64	117	53	64	117	940	1,128	2,068	1	..	1	1	2	3	5	3	8	52	83	135	881	1,040	1,921	882	1,049	1,931	1.9	..	0.9	5.9	7.9	7.0		
1905	62	94	156	62	94	156	943	1,134	2,077	4	1	5	8	1	9	15	3	18	66	84	150	850	1,045	1,895	875	1,049	1,924	6.5	1.0	3.2	7.5	8.0	7.8		
1906	82	89	171	82	89	171	932	1,134	2,066	2	..	2	5	1	6	8	3	11	72	94	166	845	1,036	1,881	840	1,037	1,877	2.4	..	1.2	8.6	9.1	8.8		
1907	37	102	139	37	102	139	882	1,138	2,020	2	1	3	..	1	1	6	23	29	65	77	142	809	1,036	1,845	837	1,042	1,879	5.4	1.0	2.1	7.7	7.4	7.6		
1908	200	93	293	200	93	293	1,009	1,129	2,138	1	..	1	..	2	2	39	6	45	69	74	143	900	1,047	1,947	854	1,038	1,892	5	..	.3	8.1	7.1	7.6		
1909	58	67	125	58	67	125	958	1,114	2,070	3	..	3	2	..	2	6	7	13	63	65	128	884	1,042	1,926	896	1,053	1,949	5.2	..	2.4	7.0	6.2	6.6		
1910	142	160	302	142	160	302	1,026	1,202	2,228	3	..	3	1	2	3	4	5	9	76	78	154	942	1,117	2,059	882	1,071	1,953	2.1	..	1.0	8.6	7.3	7.9		
1911	..	..	..	117	83	200	117	83	200	1,059	1,200	2,259	3	..	3	2																										

† Includes 2 escapes.

FOR SUMMARY OF TABLE SEE P. 142A.

TABLE B1.—Analysis of the admissions during the year 1911.

NAME OF ASYLUM.	CLASSES OF ADMISSIONS.	CONGENITAL.			ACQUIRED.							TOTAL.		
		First attack.			Not first attack.			Unknown whether first attack or not.						
		M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
TOOTING BEG.	Direct ..	61	70	131	177	259	436	5	2	7	248	338	586	
	Transfers ..	..	..	..	21	6	27	5	3	8	29	10	39
	Indirect { Statutory re-admissions ..	..	..	..	..	..	..	..	..	..	..	..	..
	Total admissions ..	61	70	131	198	265	463	10	5	15	277	348	625	
TOOTING BEG RECEIVING HOME FOR CHILDREN.	Direct ..	106	90	196	2	1	3	..	..	..	108	91	199
	Transfers ..	1	..	1	..	..	..	..	..	..	1	..	1
	Indirect { Statutory re-admissions ..	..	..	..	..	..	..	..	..	..	..	..	..
	Total admissions ..	107	90	197	2	1	3	..	..	..	109	91	200
LEAVESDEN.	Direct ..	..	..	..	..	..	..	..	..	..	..	..	..
	Transfers ..	46	52	98	64	110	174	10	3	13	121	167	288	
	Indirect { Statutory re-admissions ..	..	..	..	..	..	..	..	..	..	..	..	..
	Total admissions ..	46	52	98	64	110	174	10	3	13	121	167	288	
CATERHAM.	Direct ..	..	..	..	..	..	..	..	..	..	..	..	..
	Transfers ..	55	25	80	54	57	111	6	1	7	117	83	200	
	Indirect { Statutory re-admissions ..	..	..	..	..	..	..	..	..	..	..	..	..
	Total admissions ..	55	25	80	54	57	111	6	1	7	117	83	200	
DARENTH	Direct ..	1	..	1	..	..	..	..	..	..	1	..	1
	Transfers ..	110	121	231	..	2	2	..	..	..	110	124	234
	Indirect { Statutory re-admissions ..	..	..	..	..	..	..	..	..	..	..	..	..
	Total admissions ..	111	121	232	..	2	2	..	..	..	111	124	235

For Summary of Table see p. 143.

TABLE B2.—Showing the duration of the present attack of mental disorder on admission in the admissions during the year 1911, and stating (in those not congenital) whether first attack or not.

TOOTING BEC ASYLUM.															
Duration of mental disorder prior to admission.				DIRECT ADMISSIONS.											
				First attack.			Not first attack.			Unknown whether first attack or not.			Total.		
				M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Less than 2 weeks	..	..	3	..	..	..	..	..	..	3	..	3		
2 weeks and less than 1 month			3	2	5	..	..	..	..	3	2	5		
1 month	„	3 months	17	23	40	2	1	3	..	1	1	19	25	44	
3 months	„	6 „	23	22	45	2	..	2	..	..	..	25	22	47
6 „	„	9 „	25	29	54	..	..	..	..	..	..	25	29	54
9 „	„	12 „	10	6	16	..	..	..	..	..	..	10	6	16
12 „	„	18 „	28	42	70	..	..	..	..	..	..	28	42	70
18 „	„	2 years	5	8	13	..	..	..	..	..	..	5	8	13
2 years	„	3 „	16	13	29	..	1	1	..	..	..	16	14	30
3 „	„	5 „	19	14	33	..	..	..	..	..	..	19	14	33
5 „	„	10 „	8	4	12	..	..	..	..	..	..	8	4	12
10 „	„	15 „	2	2	4	..	..	..	..	..	..	2	2	4
15 „	„	20 „	1	..	1	..	..	..	..	..	..	1	..	1
20 „	„	25 „	2	1	3	..	..	..	..	..	..	2	1	3
Duration unknown	..	..	15	93	108	1	..	1	5	6	11	21	99	120
Congenital cases .. .. .				..	..	..	..	..	..	..	..	61	70	131
Totals				177	259	436	5	2	7	5	7	12	248	338	586

TOOTING BEC RECEIVING HOME FOR CHILDREN AND DARENTH ASYLUM.														
Less than 2 weeks	..	..	..	..	..	..	..	..	..	..	..	..	..
2 weeks and less than 1 month				..	..	..	..	..	..	..	..	..	..
1 month	„	3 months		..	..	..	..	..	..	..	..	..	..
3 months	„	6 „		..	..	..	..	..	..	..	..	..	..
6 „	„	9 „		..	..	..	..	..	..	..	..	..	..
9 „	„	12 „		..	..	..	..	..	..	..	..	..	..
12 „	„	18 „		..	..	..	..	..	..	..	..	..	..
18 „	„	2 years		..	..	..	..	..	..	..	..	..	..
2 years	„	3 „		..	..	..	..	..	..	..	..	..	..
3 „	„	5 „	2	..	2	..	..	..	..	..	2	..	2
5 „	„	10 „	..	1	1	..	..	..	..	..	..	1	1
10 „	„	15 „	..	..	..	..	..	..	..	..	..	..	..
Duration unknown	..	..	..	..	..	..	..	..	..	..	..	..	..
Congenital cases	*1 106	90	*1 196
Totals				2	1	3	109	91	200

* Indicates 1 case admitted at Darenth Asylum from Bridge Industrial Home.
FOR SUMMARY OF TABLE B2 SEE P. 143.

TABLE B3.—*Showing the ages and civil state on admission, in the admissions, direct and transfers grouped together, and in the congenital cases of the direct admissions during the year 1911.*

[illegible]



TABLE B5.— Showing the form of mental disorder on admission in the direct admissions and transfers during the year 1911.

Forms of mental disorder.				TOOTING BEC ASYLUM.									TOOTING BEC RECEIVING HOME FOR CHILDREN.									LEAVESDEN ASYLUM.									GATERHAM ASYLUM.									DARENTH ASYLUM.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
				Direct admissions.			Transfers.			Total.			Direct admissions.			Transfers.			Total.			Direct admissions.			Transfers.			Total.			Direct admissions.			Transfers.			Total.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
				M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
Congenital or infantile mental deficiency or insanity occurring early in life as it can be observed.	1.	Intellectual	a. With epilepsy	9	11	20	9	11	20	23	19	42	23	19	42	9	8	17	9	8	17	20	3	23	20	3	23	28	25	53	28	25	53																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
			b. Without epilepsy	52	59	111	52	59	111	83	71	154	1	..	1	84	71	155	37	44	81	37	44	81	35	22	57	35	22	57	1	..	1	82	96	178	83	96	179																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
	2.	Moral																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
	Insanity occurring later in life.	1.	Insanity with epilepsy	7	10	17	2	1	3	9	11	20	1	..	1	1	..	1	6	7	13	6	7	13	3	2	5	3	2	5																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
		2.	General paralysis of the insane	10	3	13	10	3	13	1	1	2	1	1	2	2	6	8	2	6	8	2	..	2	2	..	2																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
		3.	Insanity with grosser brain lesions	7	8	15	7	8	15																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
		4.	Acute delirium																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
		5.	Confusional insanity																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
		6.	Stupor	2	..	2	2	..	2																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
		7.	Primary dementia	4	35	39	1	..	1	5	35	40	1	..	1	1	..	1	12	4	16	12	4	16	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1	1	..	1

TABLE B7.—ÆTIOLOGICAL.—Showing the ætiological factors and associated conditions assigned in the direct admissions during the year 1911, distinguishing between cases—congenital, first-attack, not-first-attack, and unknown-whether-first-attack-or-not.

TOOTING BEC ASYLUM.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
ÆTIOLOGICAL FACTORS AND ASSOCIATED CONDITIONS.	CONGENITAL CASES.						FIRST-ATTACK CASES.						NOT-FIRST-ATTACK CASES.						CASES UNKNOWN-WHETHER-FIRST- ATTACK-OR-NOT.						TOTAL DIRECT ADMISSIONS.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
	PRINCIPAL.			CONTRIBU- TORY.			TOTAL INCIDENCE.	PRINCIPAL.			CONTRIBU- TORY.			TOTAL INCIDENCE.	PRINCIPAL.			CONTRIBU- TORY.			TOTAL INCIDENCE.	PRINCIPAL.			CONTRIBU- TORY.			TOTAL INCIDENCE.	TOTAL PRINCIPAL.			TOTAL CON- TRIBUTORY.			GRAND TOTAL INCIDENCE.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
	Instances where re- garded as the essential or chief factor. *	Instances where re- garded as a contributory factor or associated condition. †	INCIDENCE.	Instances where re- garded as the essential or chief factor. *	Instances where re- garded as a contributory factor or associated condition. †	INCIDENCE.		Instances where re- garded as the essential or chief factor. *	Instances where re- garded as a contributory factor or associated condition. †	INCIDENCE.	Instances where re- garded as the essential or chief factor. *	Instances where re- garded as a contributory factor or associated condition. †	INCIDENCE.		Instances where re- garded as the essential or chief factor. *	Instances where re- garded as a contributory factor or associated condition. †	INCIDENCE.	Total instances where re- garded as the essential or chief factor.	Total instances where re- garded as a contributory factor or associated condition.	INCIDENCE.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
																						M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.		M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.		M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																														
A. HEREDITY (excluding cousins, nephews, nieces and offspring).																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						</

* One entry, and one only, has been made in these columns for each case recorded in them; thus the totals of these columns will equal the number of cases belonging to that particular class.
† As several factors will have sometimes been entered in these columns in respect of one case, and, on the other hand, there may have been none to enter, no attempt should be made to totalise these columns.
‡ All cases believed to have suffered, at any time in their lives, from syphilis have been entered.

TABLE B7.—Continued—ETIOLOGICAL.—Showing the etiological factors and associated conditions assigned in the direct admissions during the year 1911, distinguishing between cases—congenital, first-attack, not-first-attack, and unknown-whether-first-attack-or-not.

TOOTING BEG RECEIVING HOME FOR CHILDREN AND DARENTH ASYLUM. (The small figures represent 1 admission to Darenth Asylum.)

ETIOLOGICAL FACTORS AND ASSOCIATED CONDITIONS.	CONGENITAL CASES.			FIRST-ATTACK CASES.			NOT-FIRST-ATTACK CASES.			CASES UNKNOWN-WHETHER-FIRST-ATTACK-OR-NOT.			TOTAL DIRECT ADMISSIONS.		
	PRINCIPAL.	CONTRIBUTORY.	TOTAL INCIDENCE.	PRINCIPAL.	CONTRIBUTORY.	TOTAL INCIDENCE.	PRINCIPAL.	CONTRIBUTORY.	TOTAL INCIDENCE.	PRINCIPAL.	CONTRIBUTORY.	TOTAL INCIDENCE.	TOTAL PRINCIPAL.	TOTAL CONTRIBUTORY.	GRAND TOTAL INCIDENCE.
	Instances where regarded as the essential or chief factor.	Instances where regarded as a contributory factor or associated condition. †		Instances where regarded as the essential or chief factor.	Instances where regarded as a contributory factor or associated condition. †		Instances where regarded as the essential or chief factor.	Instances where regarded as a contributory factor or associated condition. †		Instances where regarded as the essential or chief factor.	Instances where regarded as a contributory factor or associated condition. †		Total instances where regarded as the essential or chief factor.	Total instances where regarded as a contributory factor or associated condition.	
	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.	M. F. T.
A. HEREDITY (excluding cousins, nephews, nieces and offspring).															
1. Insane	5	7	12	..	..	..	..	..	..	..	..	..	5	7	12
2. Epileptic	2	..	2	..	..	..	..	..	..	..	..	..	2	..	2
3. Neurotic [including only hysteria, neurasthenia, spasmodic (idiopathic) asthma and chorea]	..	..	..	..	1	1	..	..	..	..	..	..	..	1	1
4. Eccentricity (in marked degree) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Alcoholism .. .. .	..	..	..	..	1	1	..	..	..	..	..	..	..	1	1
B. MENTAL INSTABILITY, as revealed by—															
1. Moral Deficiency .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Congenital mental defect, not amounting to imbecility	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Eccentricity .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
C. DEPRIVATION OF SPECIAL SENSE.															
1. Smell or taste .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Hearing .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Sight .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
D. CRITICAL PERIODS.															
1. Puberty and adolescence .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Climacteric .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Senility .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
E. CHILD-BEARING.															
1. Pregnancy .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Puerperal state (not septic) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Lactation .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
F. MENTAL STRESS.															
1. Sudden .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Prolonged .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
G. PHYSIOLOGICAL DEFECTS AND ERRORS.															
1. Malnutrition in early life (signs of rickets, etc.)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Privation and starvation .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Over-exertion (physical) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
4. Masturbation .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Sexual excess .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
H. TOXIC.															
1. Alcohol .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Drug Habit (morphia, cocaine, etc.) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Lead and other such poisons .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
4. Tuberculosis .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Influenza .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
6. Puerperal sepsis .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
7. Other specific fevers .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
8. Syphilis, acquired .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
9. Syphilis, congenital .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
10. Other Toxins .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
I. TRAUMATIC.															
1. Injuries .. .. .	..	..	..	1	..	1	1	..	1	2	..	2	2	..	2
2. Operations .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Sunstroke .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
K. DISEASES OF THE NERVOUS SYSTEM.															
1. Lesions of brain .. .. .	..	..	..	1	..	1	1	..	1	..	..	..	..	2	2
2. Lesions of spinal cord and nerves .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Epilepsy .. .. .	..	..	..	4	4	8	4	4	8	..	..	..	..	6	10
4. Other defined neuroses (limited to hysteria, neurasthenia, spasmodic asthma, and chorea)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Other neuroses which occurred in infancy or childhood (limited to convulsions and night-terrors)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
L. OTHER BODILY AFFECTIONS.															
1. Hæmopoietic system (Anæmia, etc.) .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2. Cardio-vascular degeneration .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3. Valvular heart disease .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
4. Respiratory system (excluding tuberculosis)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5. Gastro-intestinal system .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
6. Renal and vesical system .. .. .	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
7. Generative system (excluding syphilis)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
8. Other general affections, not included above (e.g., diabetes, myxœdema, etc.)	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
M. CASES IN WHICH NO PRINCIPAL FACTOR COULD WITH CERTAINTY BE ASSIGNED, but in which one or more factors were ascertained, and were returned as contributory	3	2	5	..	..	..	..	..	..	..	..	..	3	2	5
N. NONE ASSIGNABLE, notwithstanding full history and observation	12	26	38	..	..	..	1	1	..	..	..	..	12	27	39
O. NONE ASCERTAINED, history defective	84	55	139	..	..	..	..	..	..	..	..	..	84	55	139
Totals	106	90	196	Total congenital cases.			2	1	3	Total first-attack cases.			..	..	..
										Total not-first-attack cases.			..	..	..
													108	91	199
													Total direct admissions.		

* One entry, and one only, has been made in these columns for each case recorded in them; thus the total of these columns will equal the number of cases belonging to that particular class.

† As several factors will have sometimes been entered in these columns in respect of one case, and, on the other hand, there may have been none to enter, no attempt should be made to totalise these columns.

‡ All cases believed to have suffered, at any time in their lives, from syphilis have been entered.

For Summary of Table see p. 146B.

For Table B8 see p. 146C.

,, ,, B9 see p. 147.

ANNUAL REPORT, 1911, STATISTICAL COMMITTEE.

TABLE C1.—An analysis of the discharges and transfers during the year 1911.

	TOOTING BEC ASYLUM.			TOOTING BEC RECEIVING HOME FOR CHILDREN.			LEAVESDEN ASYLUM.			CATERHAM ASYLUM.			DARENTH ASYLUM.		
	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.	M. F. Tl.
DISCHARGED AS RECOVERED.															
From direct admissions.															
First attack cases	3 .. 3	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Not first attack cases.. .. .	1 .. 1	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Cases unknown whether first attack or not .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Total from direct admissions	4 .. 4	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
From transfers.															
First attack cases .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	2 .. 2	.. .. .	.. .. .	1 .. 1	.. .. .	.. .. .
Not first attack cases.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	1 .. 1	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Cases unknown whether first attack or not .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Total from transfers .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Total discharged as recovered	4 .. 4	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	3 .. 3	.. .. .	.. .. .	1 .. 1	.. .. .	.. .. .
DISCHARGED (NOT RECOVERED) AS—		RELIEVED.	NOT IMPROVED.		RELIEVED.	NOT IMPROVED.		RELIEVED.	NOT IMPROVED.		RELIEVED.	NOT IMPROVED.		RELIEVED.	NOT IMPROVED.
RELIEVED	25 16 41	.. .. .	25 16 41	2 2 4	.. .. .	2 2 4	2 3 5	.. .. .	2 3 5	2 3 5	2 3 5	2 3 5	8 13 21	.. .. .	8 13 21
NOT IMPROVED .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	10 19 29	.. .. .	10 19 29	11 3 14	.. .. .	11 3 14	.. .. .	.. .. .	.. .. .
Total	25 16 41	.. .. .	.. .. .	2 2 4	.. .. .	.. .. .	12 22 34	.. .. .	.. .. .	13 6 19	.. .. .	.. .. .	8 13 21	.. .. .	.. .. .
REASONS FOR SUCH DISCHARGES.															
To go to care of friends	3 4 7	.. .. .	.. .. .	1 2 3	.. .. .	.. .. .	.. 1 1	.. .. .	.. .. .	1 2 3	.. .. .	.. .. .	7 11 18	.. .. .	.. .. .
„ workhouse	7 4 11	.. .. .	.. .. .	1 .. 1	.. .. .	.. .. .	3 6 9	.. .. .	.. .. .	1 1 2	.. .. .	.. .. .	1 2 3	.. .. .	.. .. .
„ L.C.C. or other asylum	15 8 23	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	9 15 24	.. .. .	.. .. .	11 3 14	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
To be boarded out .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Statutory, by irregularity in reception order .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
„ by lapsing of reception order .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
To fever hospital .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Total	25 16 41	.. .. .	.. .. .	2 2 4	.. .. .	.. .. .	12 22 34	.. .. .	.. .. .	13 6 19	.. .. .	.. .. .	8 13 21	.. .. .	.. .. .
TRANSFERRED AS—															
RELIEVED .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
NOT IMPROVED	87 181 268	.. .. .	87 181 268	84 88 172	.. .. .	84 88 172	3 2 5	.. .. .	3 2 5	.. .. .	.. .. .	.. .. .	34 31 65	.. .. .	34 31 65
Total	87 181 268	.. .. .	.. .. .	84 88 172	.. .. .	.. .. .	3 2 5	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	34 31 65	.. .. .	.. .. .
DESTINATION OF SUCH TRANSFERS.															
To other asylums of the Board	87 181 268	.. .. .	.. .. .	84 88 172	.. .. .	.. .. .	3 2 5	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	34 31 65	.. .. .	.. .. .
To "single care" .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Other destination .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
Total	87 181 268	.. .. .	.. .. .	84 88 172	.. .. .	.. .. .	3 2 5	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	34 31 65	.. .. .	.. .. .
TOTAL DISCHARGED AND TRANSFERRED AS—															
RELIEVED .. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .	2 3 5	.. .. .	.. .. .	2 3 5	.. .. .	.. .. .	.. .. .	.. .. .	.. .. .
NOT IMPROVED .. .. .	.. .. .	.. .. .	112 197 309	.. .. .	.. .. .	86 90 176	.. .. .	.. .. .	13 21 34	.. .. .	.. .. .	11 3 14	.. .. .	.. .. .	42 44 86

FOR SUMMARY OF TABLE SEE P. 148.

TABLE C2.—Showing the total cases discharged recovered during the year 1911 the ages in quinquennial periods—(a) On recovery, and (b) at the commencement of the recent attack of mental disorder, arranged according to the total length of such attack.

AGE PERIODS		Less than 10.	10—14.	15—19.	20—24.	25—29.	30—34.	35—39.	40—44.	45—49.	50—54.	55—59.	60—64.	65—69.	70 & over.	Age unknown.	Total.		
TOOTING BEC ASYLUM.		M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.	M.	F.	Tl.
AGE ON RECOVERY																			
Total length of this attack of mental disorder.				2							1				1		4		4
		Age at commencement of recent attack of mental disorder.																	
Less than 1 month ..																			
1 month and less than 3 months ..																			
3 months ..																			
6 " ..																			
9 " ..																			
12 " ..																			
18 " ..																			
2 years ..																			
3 " ..																			
Duration unknown ..				2															
Totals ..				2							1				1		4		4
CATERHAM ASYLUM.																			
AGE ON RECOVERY ..				1		1						1					3		3
Total length of this attack of mental disorder.																			
Less than 1 month ..																			
1 month and less than 3 months ..																			
3 months ..																			
6 " ..																			
9 " ..																			
12 " ..																			
18 " ..				1															
2 years ..																	1		1
3 " ..												1					1		1
5 " ..																			
Duration unknown ..					1												1		1
Totals ..				1	1							1					3		3
DARENTH ASYLUM.																			
AGE ON RECOVERY ..					1												1		1
Total length of this attack of mental disorder.																			
Less than 1 month ..																			
1 month and less than 3 months ..																			
3 months ..																			
6 " ..																			
9 " ..																			
12 " ..																			
18 " ..																			
2 years ..																			
3 " ..																			
5 " ..				1															
Duration unknown ..																	1		1
Totals ..				1													1		1

TABLE C3.—*Showing the form of mental disorder, on admission, in those discharged recovered during the year 1911.*

Forms of mental disorder (on admission).								M.	F.	Tl.
TOOTING BEC ASYLUM.										
Primary dementia	..	..	..	..	..	..	..	1	..	1
Senile dementia	..	..	..	..	..	..	..	1	..	1
Chronic melancholia	..	..	..	..	..	..	..	2	..	2
								4	..	4
CATERHAM ASYLUM.										
Primary dementia	..	..	..	..	..	..	..	2	..	2
Confusional insanity	..	..	..	..	..	..	..	1	..	1
								3	..	3
DARENTH ASYLUM.										
Mania	..	..	..	..	..	..	..	1	..	1
								1	..	1

For Summary of Table C3 see p. 150.

For Table C4 see p. 150A.

TABLE D1.—Showing all the causes of death that entered into the deaths during the year 1911, arranged as PRINCIPAL, CONTRIBUTORY, and the totals of these; also the number of times each cause (whether principal or contributory) was associated with certain selected causes; and the number of occasions each principal cause of death was verified by post-mortem examination.

Causes of death.	* Instances when returned as PRINCIPAL.			No. ver- ified P.M.	Instances when returned as CON- TRIBUTORY.			Total incidence.			Showing the total correlation between any given cause of death (whether acting as principal or contributory) and the subjoined selected causes.																			
											Pneumonia.	Pulmonary tuberculosis.	Valvular heart disease.	Cerebral hæmorrhage.	Chronic Bright's disease.	Kidney disease.	General paralysis of the insane.													
	M.	F.	T.		M.	F.	T.	M.	F.	T.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
TOOTING BEC ASYLUM.																														
GENERAL DISEASES.																														
Pneumonia	9	2	11	11	8	5	13	17	7	24	..	..	1	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..
Cancer	3	1	4	3	1	2	3	4	3	7	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..
Phthisis	7	1	8	8	3	..	3	10	1	11	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Gangrene	1	1	2	2	1	1	2	2	2	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
General Tuberculosis ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF NERVOUS SYSTEM.																														
Epilepsy	1	..	1	1	..	1	1	1	1	2	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
General Paralysis of insane ..	4	4	8	8	1	..	1	5	4	9	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Chronic brain disease ..	3	3	6	6	..	..	..	3	3	6	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral softening ..	2	..	2	2	1	1	2	3	1	4	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Spinal caries ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pontine hæmorrhage ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Sub-dural hæmorrhage ..	1	..	1	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF HEART.																														
Chronic heart disease ..	10	7	17	17	4	1	5	14	8	22	1	..	..	..	..	..	..	1	..	2	1	..	..	..	..	..	..	..	..	..
Syncope	2	1	3	3	1	..	1	3	1	4	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cardiac failure ..	1	..	1	1	..	..	..	1	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Aneurism .. ..	..	..	..	..	..	1	1	..	1	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF BLOOD VESSLS.																														
Cerebral hæmorrhage ..	3	2	5	5	..	..	..	3	2	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF RESPIRATORY ORGANS.																														
Asthma .. ..	..	1	1	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Bronchitis	1	2	3	3	1	1	2	2	3	5	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF DIGESTIVE SYSTEM.																														
Enteritis .. ..	..	..	..	..	1	..	1	1	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF URINARY SYSTEM.																														
Chronic kidney disease ..	1	..	1	1	3	1	4	4	1	5	..	..	..	..	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cystitis	3	..	3	3	1	1	2	4	1	5	1	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..
Nephritis	1	..	1	1	2	..	2	3	..	3	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
Enlarged prostate ..	1	..	1	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
CONDITIONS NOT SPECIFIED.																														
Senile decay	95	124	219	199	8	4	12	103	128	231	8	6	2	..	2	1	1	..	..	..	2	1	..	..	..	..	..	..	..	..
Cretinism	1	..	1	1	..	..	..	1	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
ACCIDENT OR VIOLENCE.																														
Fracture of femur ..	..	..	..	..	..	1	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total	150	152	302	279																										
TOOTING BEC RECEIVING HOME FOR CHILDREN.																														
CONDITIONS NOT SPECIFIED.																														
Marasmus	1	1	2	2	..	..	..	1	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total	1	1	2	2																										

[illegible]

For Summary of Table D1 see page 150B.

TABLE D1 (continued).—Showing all the causes of death that entered into the deaths during the year 1911, arranged as PRINCIPAL, CONTRIBUTORY, and the totals of these; also the number of times each cause (whether principal or contributory) was associated with certain selected causes; and the number of occasions each principal cause of death was verified by post-mortem examination.

Names of causes of death.	* Instances when returned as PRINCIPAL.			No. ver- ified P.M.	Instances when returned as CON- TRIBUTORY.			Total incidence.	Showing the total correlation between any given cause of death (whether acting as principal or contributory) and the subjoined selected causes.																									
									Epidemic diarrhoea and infective enteritis.	Dysentery (colitis).	Pneumonia.	Pulmonary tuberculosis.	General paralysis of the insane.	Exhaustion from mania or melancholia.	Valvular heart disease.	Fatty degeneration of the heart.	Cerebral hæmorrhage.	Chronic Bright's disease.	Epilepsy.	Cardiac dilatation.	Dropsy.	Senile decay.												
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
CATERHAM ASYLUM.																																		
GENERAL DISEASES.																																		
Carcinoma, bladder ..	2	..	2	2	..	..	..	2	..	2	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	..	..
" liver ..	2	1	3	3	..	..	..	2	1	3	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..
" breast ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
" uterus ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tuberculosis, general ..	2	2	4	4	..	..	..	2	2	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" pulmonary ..	8	4	12	7	5	4	9	13	8	21	..	..	..	..	..	..	..	..	..	2	1	1	..	..	..	1	4	..	..	..	..	..	..	..
Tuberculous enteritis ..	..	1	1	..	..	2	2	..	3	3	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Lardaceous disease ..	2	..	2	..	..	..	..	2	..	2	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..
Syphilis ..	1	1	2	2	2	..	2	3	1	4	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
" cerebral ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Lobar pneumonia ..	27	10	37	31	3	2	5	30	12	42	..	2	..	..	..	..	1	..	..	5	4	1	1	..	..	2	2	2	1	..	..	..	..	..
Broncho ..	1	4	5	5	..	..	..	1	4	5	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ulcerative colitis ..	7	5	12	8	..	..	..	7	5	12	..	2	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Infective enteritis ..	3	3	6	5	..	2	2	3	5	8	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..
" endocarditis ..	1	..	1	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Septicaemia ..	..	..	..	..	1	..	1	1	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pyæmia ..	1	..	1	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Diabetic gangrene ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Senile ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Abscess of hip ..	..	1	1	1	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASE OF NERVOUS SYSTEM.																																		
Organic disease of brain ..	..	..	..	..	1	..	1	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Epilepsy ..	4	7	11	8	6	4	10	10	11	21	..	1	..	..	2	1	4	..	..	1	2	..	1	..	..	..	..	..	..	..	..	..	..	..
Softening of brain ..	1	1	2	2	2	1	3	3	2	5	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral meningitis ..	..	..	..	..	1	1	2	1	1	2	..	..	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Hydrocephalus congenital ..	..	..	..	..	1	..	1	1	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
General paralysis of the insane ..	1	..	1	..	..	..	..	1	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Exhaustion of mania ..	..	..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..
DISEASE OF HEART.																																		
Hypertrophy of heart ..	2	..	2	2	2	3	5	4	3	7	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Valvular disease of heart ..	5	8	13	10	10	5	15	15	13	28	..	..	1	..	4	4	2	1	..	..	..	..	..	1	..	1	..	..	2	..	..	..	..	..
Dilatation of heart ..	2	..	2	2	8	8	16	10	8	18	1	..	1	..	3	..	1	..	..	..	1	1	..	..	..	..	1	..	..	..	..	..	..	..
Angina pectoris ..	1	..	1	1	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pericarditis ..	2	1	3	3	6	..	6	8	1	9	..	..	..	5	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..
Fatty degeneration of heart ..	2	6	8	8	4	5	9	6	11	17	..	..	1	1	2	..	..	..	..	..	..	..	..	..	..	1	1	..	1	..	..	..	..	..
Endocarditis ..	..	..	..	..	1	..	1	1	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF BLOOD VESSELS.											</																							

TABLE D1 (continued).—Showing all the causes of death that entered into the deaths during the year 1911, arranged as PRINCIPAL, CONTRIBUTORY, and the totals of these; also the number of times each cause (whether principal or contributory) was associated with certain selected causes; and the number of occasions each principal cause of death was verified by post-mortem examination.

Names of causes of death.	* Instances when returned as PRINCIPAL.			No. veri- fied P.M.	Instances when returned as CON- TRIBUTORY.			Total incidence.			Showing the total correlation between any given cause of death (whether acting as principal or contributory) and the subjoined selected causes.															
	Pericarditis.	Atheroma.	Intestinal obstruction.		Meningitis.	Bronchitis.	Measles.																			
	M.	F.	T.		M.	F.	T.	M.	F.	T.	M.	F.	M.	F.	M.	F.	M.	F.								
DARENTH ASYLUM.																										
GENERAL DISEASES.																										
General tuberculosis ..	7	2	9	8	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Broncho-pneumonia ..	1	2	3	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia	4	4	8	5	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Phthisis	1	2	3	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tubercular pneumonia ..	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
„ meningitis ..	3	..	3	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tubercle of intestines ..	1	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cancer of pancreas ..	..	1	1	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Exhaustion from diarrhoea ..	..	2	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Tubercular peritonitis ..	..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pulmonary tuberculosis ..	..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF NERVOUS SYSTEM.																										
Organic brain disease ..	1	2	3	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Epilepsy, exhaustion from ..	2	3	5	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Meningitis	1	1	2	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF HEART.																										
Valvular heart disease ..	2	1	3	2	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASE OF RESPIRATORY ORGANS																										
Bronchitis .. ..	..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF DIGESTIVE SYSTEM.																										
Volvulus .. ..	..	1	1	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
CONDITIONS NOT SPECIFIED.																										
Marasmus	1	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	25	24	49	35	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..

* The figures in this column should correspond with those in the column indicated by an asterisk in table D2.

For Summary of Table D1 see page. 150B.

TABLE D2.—Showing the principal cause of death in each death during the year 1911, together with the ages at death in quinquennial periods.

TOOTING BEC ASYLUM.																															
PRINCIPAL CAUSES OF DEATH.	AGES AT DEATH IN QUINQUENNIAL PERIODS.																														
	Less than 10.		10—14		15—19		20—24		25—29		30—34		35—39		40—44		45—49		50—54		55—59		60—64		65—69		70 and over.		Totals.*		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tl.		
GENERAL DISEASES.																															
Pneumonia	1	..	..	..	..	..	..	..	..	1	..	..	1	..	1	..	6	1	9	2	11	
Cancer	2	..	..	..	..	1	..	1	..	3	1	4		
Phthisis	1	..	..	..	..	1	..	3	..	..	2	..	1	..	..	..	7	1	8		
Gangrene	1	1	1	1	2		
General tuberculosis	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1		
DISEASES OF NERVOUS SYSTEM.																															
General paralysis of insane	1	1	..	1	1	1	2	1	1	4	4	8
Chronic brain disease	1	..	..	1	..	..	..	1	1	..	..	..	..	..	..	1	..	..	..	..	..	3	3	6	
Cerebral softening	2	..	..	..	..	..	2	..	2	
Spinal caries	1	..	..	..	..	..	..	..	..	..	1	1	1	
Pontine hæmorrhage	1	..	..	..	1	1	1	
Subdural	1	..	..	1	..	1	1	
Epilepsy	1	..	1	..	1	1	
DISEASES OF HEART.																															
Chronic heart disease	1	..	1	..	1	..	..	..	1	3	5	2	1	2	10	7	17	
Syncope	1	..	..	1	..	..	..	..	..	..	..	..	2	..	2	1	3	
Cardiac failure	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1	
DISEASES OF BLOOD VESSELS.																															
Cerebral hæmorrhage	2	..	..	1	1	1	3	2	5	
DISEASES OF RESPIRATORY ORGANS.																															
Asthma	1	1	1	1	1	2	1	3
Bronchitis	1	..	..	1	..	..	..	1	..	1	2	3	
DISEASES OF URINARY SYSTEM.																															
Chronic kidney disease	1	..	1	..	1	..	1
Cystitis	1	..	1	..	1	..	3	..	3	
Nephritis	1	..	..	..	..	1	..	1	1	
Enlarged prostate	1	..	..	..	..	1	..	1	1	
CONDITIONS NOT SPECIFIED.																															
Senile decay	1	..	..	1	9	4	19	6	67	113	95	124	219	1	1	
Cretinism	1	..	..	..	..	..	..	..	..	..	..	..	1	..	1	
Total	1	2	1	3	2	1	..	..	3	1	4	1	4	4	4	1	21	8	28	11	82	119	150	152	302		
TOOTING BEC RECEIVING HOME FOR CHILDREN.																															
CONDITIONS NOT DEFINED.																															
Marasmus	1	1	2	
Total	1	1	2	

* The figures in this column should correspond with those in the column indicated by an asterisk in table D1.

TABLE D2 (continued).—Showing the principal cause of death in each death during the year 1911, together with the ages at death in quinquennial periods.

LEAVESDEN ASYLUM.																																
PRINCIPAL CAUSES OF DEATH.		AGES AT DEATH IN QUINQUENNIAL PERIODS.																														
		Less than 10.		10—14		15—19		20—24		25—29		30—34		35—39		40—44		45—49		50—54		55—59		60—64		65—69		70 and over.		Totals.		
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tl.		
GENERAL DISEASES.																																
Pernicious anæmia	1	..	1	1	1	..	1	
Enteric fever	1	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	2	..	2		
Cancer	1	..	..	..	..	..	..	1	..	..	..	..	..	2	..	2		
Tuberculosis of elbow	1	..	1	1	1		
Gangrene	1	..	1	1	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	1	1		
General tuberculosis	1	..	1	1	..	..	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	1	5	6		
Cellulitis	1	..	..	..	..	..	..	..	..	1	1	1		
Pneumonia	1	..	..	1	..	2	..	..	..	..	..	..	1	..	..	1	..	3	..	1	1	2	8	10		
Tuberculosis pulmonary	2	3	3	7	3	..	1	..	2	1	1	1	1	1	2	2	..	1	..	15	15	30	
DISEASES OF NERVOUS SYSTEM.																																
Status epilepticus	1	2	1	..	..	1	1	..	..	..	2	1	1	..	..	1	2	..	..	..	..	5	8	13		
General paralysis of insane	1	..	..	..	1	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	3	3	6		
Chronic cerebral disease	1	..	..	..	..	..	..	..	..	..	..	..	2	..	2	1	..	..	..	..	1	4	5	5		
Hydrocephalus congenital	1	..	..	..	..	..	..	..	..	..	1	1	..	1	..	..	..	..	..	1	1	2	2		
Porencephaly	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	2	2	2		
Cerebral hæmorrhage	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	1	..	..	3	3	3		
.. softening	1	..	..	..	..	1	..	..	2	..	2	..	2	..	2	7	7	7		
Syphilitic disease of brain	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1		
DISEASES OF HEART.																																
Fatty degeneration	1	..	..	..	1	..	1	..	1	..	1	1	1	1	..	..	..	..	1	4	5		
Valvular disease	1	1	1	..	1	1	1	1	..	1	..	..	3	2	5	7	7		
Endocarditis ulcerative	1	..	..	..	..	..	..	..	1	1	1		
Coronary artery	1	..	..	..	..	..	..	1	1	1		
DISEASES OF RESPIRATORY ORGANS.																																
Gangrene of lung	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	2		
Empyema	1	..	1	..	1	..	1	..	..	..	..	..	..	..	2	2	2		
Bronchitis	1	..	..	1	..	..	..	..	1	..	..	1	2	2	2		
Pleurisy	1	..	..	..	..	..	..	..	..	1	..	..	..	..	1	1	1	1		
Œdema of lungs	1	..	..	..	..	..	..	..	1	1	1		
Congestion of lungs	1	..	1	..	..	..	1	1	1		
DISEASES OF DIGESTIVE SYSTEM.																																
Volvulus	1	1	1	..	1	1	
Abscess of kidney (non-tubercular)	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1		
Intestinal obstruction	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1		
Cicatrical contraction of colon	1	..	..	1	1	1	1		
DISEASES OF URINARY SYSTEM.																																
Nephritis, chronic	1	1	2	..	2	2	
Urethra, stricture of	1	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1		
Enlarged prostate	1	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1		
CONDITIONS NOT SPECIFIED.																																
Senile decay	1	1	1	1	..	1	2	12	3	14	17		
ACCIDENTS.																																
Obstruction of bowels by swallowing rubbish (no inquest)	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	1		
Fracture of femur (inquest)	1	1	1	1	1		
Totals	3	4	9	6	9	4	5	5	1	3	3	6	7	4	10	4	7	6	13	4	5	3	23	49	95	144		

For Summary of Table see p. 150C

TABLE D2 (continued).—Showing the principal cause of death in each death during the year 1911, together with the ages at death in quinquennial periods.

CATERHAM ASYLUM.																		
PRINCIPAL CAUSES OF DEATH.	AGES AT DEATH IN QUINQUENNIAL PERIODS.																	
	Less than 10.		10—14		15—19		20—24		25—29		30—34		35—39		40—44		45—49	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
GENERAL DISEASES.																		
Carcinoma, bladder	1	..
" liver	1	..
" breast	1
" uterus	1	..
Tuberculosis, general	1	1	1	1	..	..	..	..
" pulmonary	3	..	..	2	2	..	1	1	2	1	..	..	..	..
Tuberculous enteritis	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Lardaceous disease	1	..	..	..	..	..	1	..
Syphilis	1	..	1	..
" cerebral	1	..	..	..	..
Lobar pneumonia	1	1	4	..	..	..	2	..	1	1	2	..	4	1
Broncho	1	1	..	1	..	..	..	..	..	..	2	2
Ulcerative colitis	1	..	..	..	..	1	..	..	..	..	1	..	..
Infective enteritis	1	1	..	..	1	1	..	1	1	..	..	..	..	..
" endocarditis	1	..	..
Abscess of hip	1	..	..	..
Pyæmia	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Diabetic gangrene	1	..	..	..	..	..	..	..	..	..	..
Senile	1	..
DISEASE OF NERVOUS SYSTEM.																		
Epilepsy	1	..	2	1	..	..	2	..	..	..	1	1
Softening of brain	1	..	..
General paralysis of insane	1	..	..
DISEASE OF HEART.																		
Hypertrophy of heart	1	..	..	..
Valvular disease of heart	1	..	1	..	1	..	..	1	..	1	..	..
Dilatation of heart	1	..	..	..
Angina pectoris	1	..	..	..
Pericarditis	1	..	..	..	1	..	..	1	..
Fatty degeneration of heart	1	..	..	3	1	..
DISEASES OF BLOOD VESSELS.																		
Arterio sclerosis	1	..	..	..	1	..	..	..
Cerebral hemorrhage	1	..	..	1	..
DISEASES OF RESPIRATORY ORGANS.																		
Fibroid of lung	1	..	..	..	..	..	1	..	..
Gangrene of lung	1	1	..	1	..	..	1	..	..	..	..	..	..
Œdema	2	..
Pleurisy	1	..	..	..
Chronic bronchitis	1	..
DISEASES OF DIGESTIVE SYSTEM.																		
Enteritis simple	1	..	..	..	..	..	..	..	1	..	..	1	..	..
Volvulus	1	..	..	..	..	..	..	..	..	..	1	1
Gastric ulcer	2	..	..	..	..	1	..	..	..	..	..	..	..	..
DISEASE OF LYMPHATIC AND DUCTLESS GLANDS.																		
Status lymphaticus	1	..	..	..	..	1	..	..	..
Goitre	1	..	..	..	..	..	..
DISEASE OF URINARY SYSTEM																		
Chronic Bright's disease	1	..	1	..	4	2
Cystitis	1	..	..	..	..	..
CONDITIONS NOT SPECIFIED.																		
Senile decay	2	1
Totals	7	5	5	7	4	6	5	1	7	8	9	3	9	6

For Summary of Table see p. 150C.

TABLE D2 (continued).—Showing the principal cause of death in each death during the year 1911, together with the ages at death in quinquennial periods.

PRINCIPAL CAUSES OF DEATH.		AGES AT DEATH IN QUINQUENNIAL PERIODS.															Totals.															
		Less than 10.		10—14		15—19		20—24		25—29		30—34		35—39		40—44			45—49		50—54		55—59		60—64		65—69		70 and over.			
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.			F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.			F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
GENERAL DISEASES.		4	1	2	..	1	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	7	2	9	
General tuberculosis		..	1	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	3	
Broncho pneumonia		..	1	3	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4	4	8	
Pneumonia ..		1	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	3		
Phthisis ..		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1		
Tubercular pneumonia		..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1		
" meningitis		2	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	3	..	3		
Tubercle of intestines		1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1		
Cancer of pancreas ..		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	
Exhaustion from diarrhoea		..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	1	2	2
Tubercular peritonitis		..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1
Pulmonary tuberculosis		..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1
DISEASES OF NERVOUS SYSTEM.		..	..	1	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	2	3	3
Organic brain disease		..	2	1	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	2	3	5	5
Epilepsy, exhaustion from ..		1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1	2	2
Meningitis ..		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF HEART.		..	..	..	..	..	..	..	..	1	..	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..	2	1	3	3	3
Valvular heart disease		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
DISEASES OF RESPIRATORY ORGANS.		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Bronchitis		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1
DISEASES OF DIGESTIVE SYSTEM.		..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	1	1
Volvulus ..		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
CONDITIONS NOT SPECIFIED.		..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1	1	1
Marasmus ..		..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Total ..		10	10	10	5	..	2	..	1	2	2	2	..	1	1	..	..	..	..	..	..	..	..	..	..	..	..	25	24	49	49	49

For Summary of Table see page 150C.

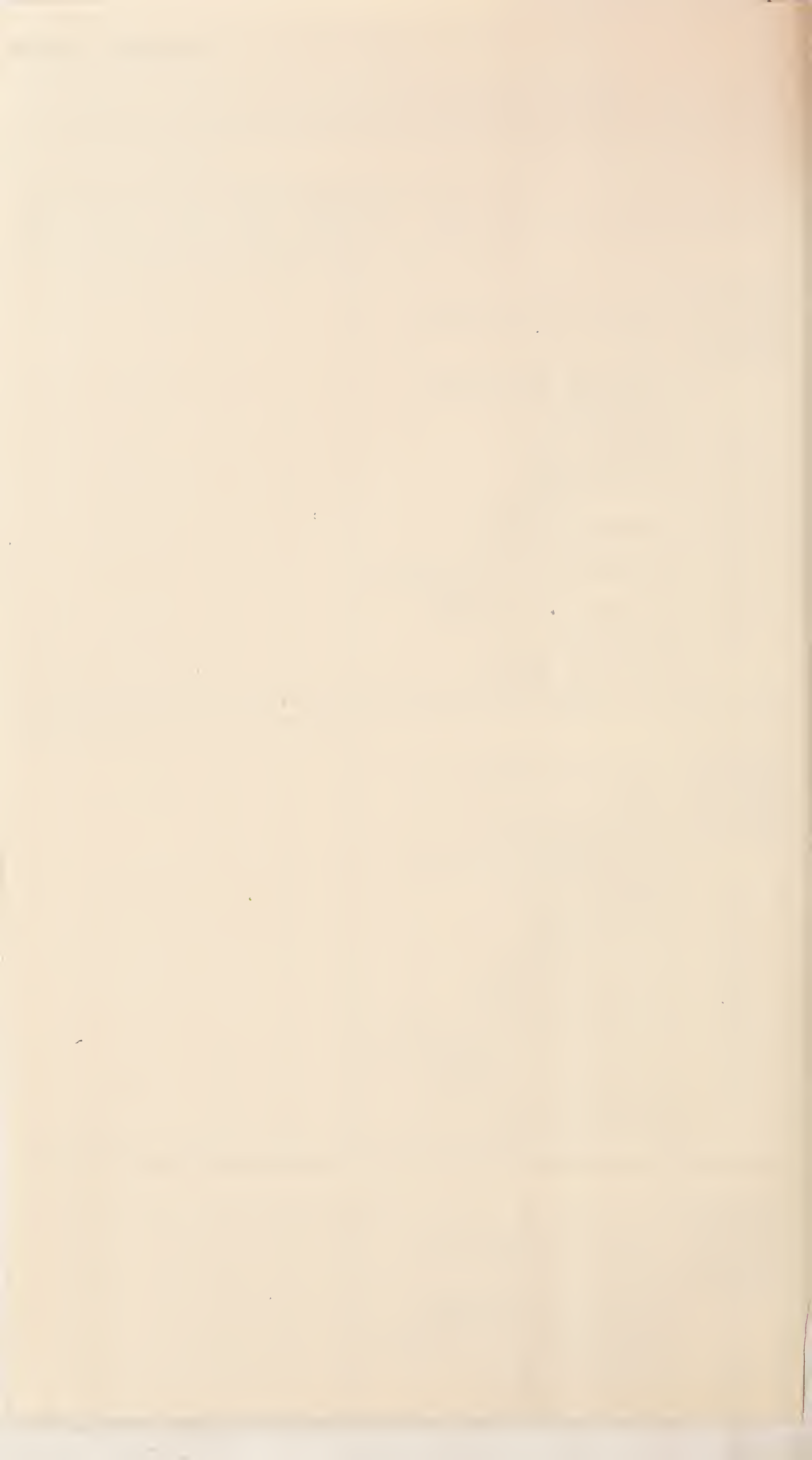


TABLE E1.—Showing the ages (in quinquennial periods) of those on the registers on the 31st December, 1911, arranged according to the total duration of present attack of mental disorder.

TOOTING BEC ASYLUM.																																					
Ages on 31st December, 1911, of those on Registers on that date.																																					
Total duration of present attack of mental disorder.	Less than 10.		10—14.		15—19.		20—24.		25—29.		30—34.		35—39.		40—44.		45—49.		50—54.		55—59.		60—64.		65—69.		70—74.		75—79.		80 and over.		Un-known.		TOTALS.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Tl.		
Congenital	9	8	12	4	8	5	3	1	10	8	2	3	2	1	4	4	2	..	2	1	1	2	57	35	92
Less than 3 months	1	..	..	..	..	..	..	..	1	..	3	..	4	..	1	..	..	..	..	10	..	10	
3 months and less than 6 months	1	1	3	1	..	2	..	..	..	..	..	7	5	12	
6 " " " 12 " "	2	..	1	..	2	1	2	..	5	..	5	2	3	2	1	8	1	6	..	5	..	22	24	46	
12 " " " 18 " "	1	..	1	..	3	1	5	2	4	1	11	3	7	7	7	8	4	7	..	43	29	72	
18 " " " 2 years	1	..	1	..	2	..	..	1	5	..	6	3	10	3	5	6	2	3	..	32	16	48	
2 years " " 3 " "	1	1	..	..	..	..	3	2	2	3	3	3	6	10	7	6	6	12	4	14	..	32	51	83	
3 " " " 5 " "	1	..	..	..	..	..	..	..	..	..	1	1	1	2	7	3	7	10	12	11	8	15	11	25	..	49	68	117	
5 " " " 10 " "	1	..	1	..	1	..	1	1	..	1	..	1	1	1	2	4	5	4	7	11	11	21	11	11	19	8	26	..	65	85	150
10 " " " 20 " "	1	1	..	1	..	2	2	1	2	1	2	4	5	4	7	11	11	21	11	11	19	3	10	..	26	23	49
20 " " " 30 " "	1	1	..	2	2	1	2	..	1	5	..	7	2	6	6	3	5	1	..	20	13	33
30 " " " 40 " "	1	1	1	1	..	2	7	3	3	1	3	3	5	1	5	1	6
40 " " " 50 " "	1	..	2	1	2	..	1	1	..	5	2	7	
Duration unknown	1	..	..	..	..	..	..	..	..	..	..	5	2	4	4	1	6	10	11	14	15	33	14	43	15	46	5	59	..	72	216	288	
Totals	10	9	13	5	10	5	4	2	13	10	8	9	13	8	21	14	27	26	43	35	82	76	89	95	69	123	43	151	445	568	1,013

TOOTING BEC RECEIVING HOME FOR CHILDREN.																																				
Congenital	32	13	11	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	45	15	60
Less than 3 months ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3 months and less than 6 months ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
6 " " " 12 " "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
12 " " " 18 " "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
18 " " " 2 years	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
2 years " " 3 " "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
3 " " " 5 " "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
5 " " " 10 " "	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1	..	1
10 " " " 20 " "	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
20 " " " 30 " "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
30 " " " 40 " "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
40 " " " 50 " "	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Duration unknown ..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals	32	13	12	3	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	46	16	62

LEAVESDEN ASYLUM.																																				
Congenital	21	51	96	73	92	72	76	69	78	77	47	73	34	45	42	38	25	27	13	16	7	7	7	15	..	3	1	..	..	539	566	1,105
Less than 3 months
3 months and less than 6 months	1	..	1	1	..	2	..	1	3	..	3	1	..	1	1	..	1	6	..	12
6 " " " 12 " "	7	..	1	2	1	2	..	1	3	..	1	2	..	2	..	1	2	..	3	..	4	14	17	31	
12 " " " 18 " "	2	1	2	..	3	1	1	1	1	1	1	3												

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For summary of Table E2, see p. 152.

APPENDIX III.

REPORT UPON THE LABORATORY WORK AND PREPARATION OF DIPHTHERIA ANTITOXIN CARRIED OUT UNDER THE METROPOLITAN ASYLUMS BOARD DURING THE YEAR 1911.

BY G. SIMS WOODHEAD, M.A., M.D., LL.D.,
BACTERIOLOGICAL ADVISER TO THE BOARD,

AND

G. E. CARTWRIGHT WOOD, M.D., B.Sc.,
BACTERIOLOGIST TO THE BOARD.

BELMONT LABORATORIES,

SUTTON,

SURREY.

10 May, 1912.

The work of the laboratories has been carried on under favourable conditions during the past year, and much of it has been of considerable interest.

Diphtheria antitoxin.

The preparation of diphtheria antitoxin has been carried out much on the lines of former years. The amount supplied during 1911, to the various institutions of the Board, included 26,108 doses, each of 4,000 units, in addition to 1,740,000 units containing no antiseptic for intravenous injections, or, in all, 106,172,000 units. During the year 6,127 cases, including 367 in which diphtheria bacilli were found to be present although they manifested no clinical evidence of the disease, were treated in the Board's hospitals for diphtheria. It is calculated that on an average 17,328 units were used for each patient. The amount of antitoxin supplied, the number of cases treated, and the amount of antitoxin used for each patient, all show a considerable increase, the corresponding figures for 1910 being 67,788,000 units supplied for a total of 4,502 patients treated, or 14,751 units per patient.

In addition to the supply to the Board's institutions, two hospitals not under the Board, viz. :—The Middlesex Hospital, and the Hospital for Sick Children, Great Ormond Street, were, as in previous years, provided with diphtheria antitoxin, the total amount taken by these hospitals during 1911 being 1,000,000 units as compared with 700,000 units in 1910.

Other supplies. There were also sent to the Board's institutions outfits necessary for diagnostic work and a large quantity of various culture media. A summary of these supplies will be found in the tabular statement appended to this report.

DIAGNOSTIC WORK.

Diphtheria examinations. During the past year 616 specimens, mainly "swabs" taken from the throat, nose, or ear of patients in the hospitals under the Board have been examined for the presence of virulent diphtheria bacilli. These specimens were derived from 311 patients in whom the diagnosis was doubtful or who were awaiting their discharge from hospital. It is seen that there were examined in the laboratories, specimens from 5·07 per cent. of all the diphtheria patients treated in the Board's hospitals, the remainder probably being cases in which the diagnosis was simple and straightforward. In 1910 the corresponding figures were 551 specimens from 251 patients, or 6·4 per cent. of the total cases treated.

Agglutinative reactions. During 1911, 437 samples of blood taken from typhoid patients in the Board's fever hospitals have been examined for the determination of the agglutinative reaction of the serum from these samples upon the typhoid bacilli, with the object of corroborating or correcting the diagnosis of enteric fever (Widal's reaction). These specimens were derived from 360 patients or 80·3 per cent. of the total cases treated during the year. 382 samples of blood sent from the Board's asylums were tested in a similar manner, the samples being obtained from 368 inmates, many of whom were of faulty habits. 10 samples of blood have also been examined for their agglutinative reaction upon other bacteria, viz. :—8 upon organisms allied to typhoid bacilli—the members of the paratyphoid group—and one each upon cholera vibrio and bacillus coli communis.

Typhoid examinations. The examination for the presence of typhoid bacilli of enteric fever patients awaiting their discharge from hospitals of the Board was completed in January, 1911. 143 fæces and 143 urines derived from 60 patients being examined during the year. Similar examinations have also been made for the asylums of the Board of 330 fæces and 336 urines derived from 85 inmates. 6 fæces and 6 urines from 3 patients in the Board's Children's institutions have also been examined.

Special examinations. 25 samples of cerebro-spinal fluid from suspected cases of cerebro-spinal meningitis and 12 specimens from cases suspected to be suffering from tuberculosis have been submitted for examination during the year. In addition, 14 samples have been received at the laboratories, and there examined with the object of separating and, if possible, identifying the organisms present in these samples. In 32 cases standardised vaccines designed for use in the treatment of the cases were prepared from the bacteria isolated from material submitted for examination, and in 16 cases vaccines prepared from organisms cultures of which were maintained at the laboratories, were supplied.

Various. The water supplies of certain of the Board's institutions have been kept under careful observation during the past year, 31 samples of potable water taken from five of the institutions having been brought under examination.

ANNUAL REPORT, 1911,

The sterilizing plant at Leavesden Asylum has been tested during the year.
The following table shews the number of examinations carried out for the Board's asylums, Infectious hospitals, and Children's institutions, during the year :—

Institutions.	Diphtheria examinations.	Typhoid.		Widals.	Other examinations.	Totals.
		Fæces.	Urine.			
Infectious hospitals	612	143	143	437	71	1,406
Asylums .. ..	..	330	336	382	12	1,060
Children's institutions . . .	4	6	6	7	71	94
Totals	616	479	485	826	154	2,560

(Signed) G. SIMS WOODHEAD.
(Signed) G. E. CARTWRIGHT WOOD.

Return of work done and antitoxin supplied during the year ended 31st December, 1911.

[illegible]

* also 300 c.c. beef broth.

<i>General hospitals</i>			
Hosp. for Sick Children	225	..	900,000
Middlesex Hospital ..	25	..	100,000
Totals (general hosps.)		250	1,000,000
Grand totals		26,358	107,172,000

MEDICAL SUPPLEMENT

FOR THE

YEAR 1911.

EDITED BY

E. W. GOODALL, M.D.,

AND

F. M. TURNER, M.D.

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1.—PREFACE.

The tables in this supplement with the exception of the last two, tables XVII. and XVIII., have been compiled from completed cases, that is cases that have been discharged or have died, or have been transferred from the acute to the convalescent hospitals, during the year 1911.

The determination of the Managers to admit cases of measles and whooping-cough into their fever hospitals has necessitated the addition of two tables, one for each disease, showing the incidence of complications. Inasmuch as the details of the tables which were to appear in the supplement for 1911, had been settled before the decision to admit cases of measles and whooping-cough had been arrived at, the tables showing the incidence of the complications of these two diseases were not drawn up till some time after a considerable number of cases had passed through the hospitals. This is probably an important, if not the chief cause, for the wide variation in the incidence of certain of the complications at the different hospitals. But in respect of the commonly recognised complications the figures are probably accurate enough. It will be seen that broncho-pneumonia is the most frequent complication of measles and whooping-cough, and that the next most frequent, especially in the case of measles, is otitis.

The publication in last year's Supplement (pp. 247, etc.) of tables showing the incidence of the complications of scarlet fever, diphtheria and enteric fever for the ten years 1900 to 1909, enables us to make a comparison between their incidence for 1911 and the mean incidence for the whole period 1900 to 1909. From this it appears that, in scarlet fever, the incidence of otitis, ulcerative stomatitis and nephritis was below the mean, while that of relapses and albuminuria was above it. Relapses were twice as frequent during 1911 as during the period, 1900 to 1909.

In diphtheria the incidence of relapses, paralysis and albuminuria was diminished, as also was that of rashes due to antitoxic serum. But the incidence of joint pains was slightly above the mean.

In enteric fever the incidence of all the more frequent complications is lower than the mean for the ten years referred to, with the exception of nephritis. The mean incidence of this complication for the ten-yearly period has not been given, as it was not recorded in every one of the ten years. But the highest recorded incidence was 1·5 per cent.

It can be stated with some confidence that as a rule the incidence of complications is a measure of the severity of the disease during the course of which they arise; the more severe the cases of the disease are, the more frequent are the complications. From this it would appear that the diseases scarlet fever, diphtheria and enteric fever, were less severe during the year 1911 than during the period 1900 to 1909.

As cases of measles and whooping-cough are now regularly admitted to the Managers' fever hospitals, these diseases disappear from the table of miscellaneous diseases.

2. COMPLICATIONS AND CO-EXISTENT INFECTIOUS DISEASES, 1911.

TABLE I.—Showing incidence of complications amongst cases of scarlet fever completed during 1911.

COMPLICATIONS.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove	South-Eastern.	Brook.	Northern.	Southern.	Total.	Ratio per cent.
Total cases	655	1,267	1,064	970	771	1,240	1,228	1,243	(2,536)	(2,997)	8,438	..
Relapse	4	13	34	20	10	32	9	25	60	48	255	3.02
Rheumatism	11	35	42	33	54	45	39	28	14	20	321	3.80
Chorea .. .. .	..	..	2	..	1	..	2	1	..	..	6	.07
Pyæmia .. .. .	..	1	1	5	1	1	2	1	..	..	12	.14
Meningitis.. .. .	..	..	1	2	..	..	..	..	..	..	3	.04
Otitis	52	114	72	101	83	107	137	107	92	98	963	11.42
Mastoid abscess ¹ ..	1	5	3	3	4	3	7	8	3	2	39	.46
Endocarditis	2	8	4	2	3	8	2	26	2	6	63	.75
Pericarditis .. .. .	..	2	1	1	3	2	3	..	..	2	14	.17
Laryngitis.. .. .	3	1	..	2	..	1	3	..	..	3	13	.15
Bronchitis.. .. .	..	7	3	1	..	4	3	7	5	7	37	.44
Broncho-pneumonia ..	3	16	1	4	..	3	5	4	2	..	38	.45
Pneumonia	1	3	2	1	1	1	4	4	1	2	20	.24
Pleurisy	1	..	1	..	..	1	3	3	..	1	10	.12
Empyema .. .. .	..	4	1	..	..	..	3	..	..	..	8	.09
Stomatitis, ulcerative ..	4	12	5	7	2	4	6	2	16	4	62	.73
Tonsillitis during convalescence	6	6	25	11	14	15	16	15	14	51	173	2.05
Jaundice	7	2	2	..	2	7	3	3	3	4	33	.39
Nephritis	13	37	34	27	35	45	47	32	16	39	325	3.85
Albuminuria ²	17	89	28	57	19	126	69	85	81	57	628	7.44
Cervical cellulitis	4	4	4	1	..	1	3	4	..	..	21	.25
Adenitis, suppurative, occurring in the acute stage .. .. .	..	2	6	24	9	8	3	6	..	..	58	.69
Adenitis of convalescence, simple	24	126	60	35	65	43	78	52	31	22	536	6.36
Adenitis of convalescence, suppurative	13	10	7	5	1	8	15	12	7	8	86	1.02
Abscesses — excluding mastoid and cervical abscesses	13	18	6	5	2	5	12	4	..	11	76	.90
Diphtheria	7	3	4	9	7	5	19	6	37	22	119	1.41
Chickenpox	3	1	10	14	22	28	3	7	26	22	136	1.61
Measles	6	10	6	1	4	26	25	6	3	23	110	1.30
Rubella	7	4	3	15	5	9	1	6	..	..	50	.59
Whooping cough .. .. .	..	4	1	2	1	4	3	1	..	..	16	.19
Mumps .. .. .	..	4	1	..	..	..	..	..	..	..	5	.06
Erysipelas.. .. .	..	1	..	..	..	1	2	1	..	..	5	.06
Enteric fever .. .. .	..	..	1	..	..	..	..	..	..	..	1	.01

1 Includes all abscesses in and around the mastoid process.
2 Includes all cases in which albumen was detected, even if found only on one occasion, and in which there were no other signs of nephritis.

TABLE II.—*Showing incidence of complications amongst cases of diphtheria completed during 1911.*

COMPLICATIONS.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Brook.	Northern.	Southern.	Total.	Ratio Per cent.
Total cases	400	660	572	646	491	519	687	755	(915)	(541)	4,730	..
Relapse .. .. .	..	5	4	..	1	..	3	5	8	4	30	·63
Paralysis	37	110	77	72	32	52	68	71	7	3	529	11·15
Otitis	19	33	11	24	29	18	61	23	23	14	255	5·38
Mastoid abscess .. .. .	..	..	..	1	..	..	1	1	..	..	3	·06
Pneumonia	2	2	1	..	2	..	14	1	..	..	22	·46
Broncho-pneumonia	10	34	7	14	4	3	4	5	..	..	81	1·71
Adenitis-suppurative, occurring in the acute stage .. .. .	..	..	..	5	3	1	..	1	..	..	10	·21
Adenitis of convalescence—simple	4	31	5	10	27	26	14	20	6	..	143	3·02
Adenitis of convalescence—suppurative	2	5	..	4	2	1	2	2	..	1	19	·40
Nephritis .. .. .	..	5	1	2	4	1	2	1	2	..	18	·38
Albuminuria	141	181	101	93	56	235	185	201	22	3	1,218	25·70
Scarlet fever	5	6	6	17	31	13	15	20	19	1	133	2·81
Chickenpox	4	4	4	2	13	..	..	1	2	..	30	·63
Measles	14	4	8	3	9	7	15	7	1	..	68	1·43
Whooping cough .. .. .	..	1	3	..	3	..	1	..	3	..	11	·23
Rubella	5	5	..	3	4	..	7	..	16	..	40	·85
Erysipelas .. .. .	..	..	..	..	..	..	1	1	..	..	2	·04
Mumps	1	..	..	..	..	..	..	..	..	..	1	·02
<i>Complications referable to antitoxin amongst cases of diphtheria treated with it.</i>												
Total cases	389	647	491	570	483	501	642	672	..	..	4,395	..
Rash	94	225	182	177	106	212	145	205	..	..	1,346	30·64
Joint pains	12	30	27	19	33	36	22	47	..	..	226	5·15
Abscess	2	3	5	1	..	2	7	1	..	..	21	·48

TABLE III.—*Showing incidence of complications amongst cases of enteric fever completed during 1911.*

COMPLICATIONS.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Brook.	Total.	Ratio per cent.
Total cases	91	28	74	59	61	..	85	..	398	..
Relapse	12	1	..	5	5	..	2	..	25	6·3
Hæmorrhage	2	2	6	5	3	..	8	..	26	6·5
Perforation	2	2	..	1	..	..	3	..	8	2·0
Peritonitis (non-perforative) .. .. .	..	2	1	..	..	..	..	..	3	·8
Pneumonia	4	1	2	1	2	..	1	..	11	2·7
Broncho-pneumonia .. .. .	..	1	..	..	..	..	..	..	1	·3
Pleurisy	2	1	..	..	..	..	3	..	6	1·5
Nephritis	1	..	1	3	4	..	1	..	10	2·5
Parotitis	1	..	..	..	..	..	1	..	2	·5
Periostitis	2	..	..	1	..	..	..	..	3	·8
Phlebitis .. .. .	..	1	1	2	..	..	2	..	6	1·5
Dementia	1	..	1	..	..	..	1	..	3	·8
Peripheral neuritis .. .. .	..	..	..	..	..	..	..	..	..	..
Otitis	4	..	4	2	1	..	3	..	14	3·5
Abscesses	1	1	1	1	1	..	..	..	5	1·2
Boils	5	..	..	1	1	..	3	..	10	2·5
Scarlet fever .. .. .	..	..	1	..	..	..	1	..	2	·5
Diphtheria .. .. .	..	1	..	..	..	..	1	..	2	·5
Erysipelas .. .. .	..	..	1	1	..	..	..	..	2	·5

TABLE IV.—Incidence of complications amongst cases of measles completed during 1911.

COMPLICATIONS.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Brook.	Northern.	Southern.	Total.	Ratio per cent.
Total cases	736	187	575	399	440	82	352	413	(418)	(64)	3,184	..
Relapse of disease .. ..	..	..	..	1	..	..	..	..	..	..	1	·03
Pyæmia .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Meningitis .. ..	..	..	2	..	..	..	1	..	2	..	5	·16
Otitis	97	37	65	42	47	15	59	64	18	5	449	14·10
Vesicular and bullous eruptions ..	25	..	4	1	..	..	1	..	..	..	31	·97
Laryngitis	43	2	1	6	3	1	6	20	..	..	82	2·57
Broncho-pneumonia	112	101	80	76	50	15	46	82	5	..	567	17·78
Pneumonia	4	2	2	6	1	..	16	5	3	..	39	1·22
Pleurisy	2	..	..	..	..	..	1	1	..	..	4	·12
Empyema .. ..	..	4	..	1	..	1	1	..	..	..	7	·22
Stomatitis	28	3	12	5	7	..	6	10	3	1	75	2·36
Cancrum oris	1	..	..	..	..	1	..	1	..	..	3	·09
Albuminuria	11	19	8	3	5	4	59	13	5	..	127	3·98
Adenitis, simple	3	2	10	1	6	1	2	9	1	1	36	1·10
„ „ suppurative	6	4	4	1	..	1	2	3	1	..	22	·69
Abscesses (other kinds)	36	6	9	3	1	1	5	9	2	..	72	2·26
Conjunctivitis	46	2	6	9	1	..	17	9	10	1	101	3·17
Keratitis .. ..	..	1	3	1	..	1	1	5	2	..	14	·44
Enteritis	2	2	34	..	5	..	8	8	..	..	59	1·85
Scarlet fever	13	9	2	1	6	1	2	5	3	1	43	1·35
Diphtheria	10	3	8	4	2	2	19	4	8	..	60	1·88
Chickenpox	4	..	2	1	4	..	1	3	1	..	16	·50
Rubella	8	5	..	..	3	..	..	4	23	..	43	1·35
Whooping cough	5	..	46	..	15	3	1	22	11	8	111	3·48
Mumps .. ..	..	1	4	..	..	..	..	..	..	..	5	·16
Erysipelas	1	..	..	1	..	..	..	1	..	..	3	·09
Tuberculosis	5	1	1	4	..	1	1	2	1	..	16	·50

TABLE V.—Incidence of complications amongst cases of whooping cough completed during 1911.

COMPLICATIONS.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Brook.	Northern.	Southern.	Total.	Ratio per cent.
Total cases	6	356	1	216	2	226	233	5	(288)	(5)	1,045	..
Otitis	1	14	..	12	..	6	16	..	2	..	51	4·9
Meningitis .. ..	..	1	..	..	..	..	3	..	..	..	4	·4
Convulsions .. ..	..	9	..	1	..	7	5	..	..	..	22	2·1
Broncho-pneumonia .. ..	..	75	..	31	..	31	15	2	5	..	159	15·2
Pneumonia .. ..	..	5	..	5	..	..	8	..	..	..	18	1·7
Laryngitis	2	..	..	2	..	..	..	1	..	..	5	·5
Pleurisy .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Empyema .. ..	..	1	..	..	..	1	1	..	..	..	3	·3
Bronchiectasis .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Atelectasis .. ..	..	..	..	..	..	..	..	..	..	..	..	..
Stomatitis .. ..	..	1	..	2	..	3	6	..	4	..	16	1·5
Albuminuria	1	6	..	5	..	4	15	..	1	..	32	3·1
Scarlet fever .. ..	..	2	..	2	..	2	1	..	4	..	11	1·1
Diphtheria .. ..	..	1	..	..	..	..	1	..	2	..	4	·4
Chickenpox .. ..	..	1	..	3	..	..	5	..	..	..	9	·9
Measles	1	5	..	5	..	6	6	..	..	..	23	2·2
Rubella .. ..	..	15	..	..	..	19	3	..	20	..	57	5·5
Mumps .. ..	..	..	..	..	..	7	..	..	..	..	7	·7
Tuberculosis .. ..	..	1	..	..	..	1	1	..	..	..	3	·3

TABLE VI.—Showing number of cases in which two or more separate infectious diseases were co-existent at the time of admission during 1911.

DISEASES.	Eastern.	North-Eastern.	North-Western.	Western.	South-Western.	Grove.	South-Eastern.	Brook.	TOTAL.
Scarlet fever and diphtheria ..	6	6	2	6	8	4	4	5	41
Scarlet fever and chickenpox ..	2	9	3	17	1	14	7	2	55
Scarlet fever and whooping cough ..	3	11	..	4	3	9	5	..	35
Scarlet fever and measles ..	5	8	2	2	..	9	1	1	28
Scarlet fever and rubella ..	..	1	..	2	..	9	1	2	15
Scarlet fever and enteric fever ..	..	..	..	..	..	..	1	..	1
Scarlet fever and syphilis ..	..	..	..	..	..	..	1	..	1
Scarlet fever and mumps ..	..	..	..	..	..	..	1	..	1
Scarlet fever, measles and mumps ..	..	1	..	..	..	..	..	..	1
Diphtheria and measles ..	11	11	3	7	2	8	17	8	67
Diphtheria and chickenpox ..	4	9	1	1	..	3	1	1	20
Diphtheria and whooping cough ..	3	13	1	4	2	2	2	1	28
Diphtheria and enteric fever ..	..	..	..	..	..	..	..	..	..
Diphtheria and rubella ..	..	1	..	1	..	..	..	1	3
Diphtheria and syphilis ..	..	..	..	..	..	..	..	1	1
Diphtheria and mumps ..	1	..	..	..	..	1	1	..	3
Diphtheria and erysipelas ..	..	..	..	..	..	..	1	..	1
Diphtheria, whooping cough and measles ..	..	1	..	..	..	..	..	..	1
Measles and chickenpox ..	8	1	..	6	3	..	1	2	21
Measles and whooping cough ..	15	48	..	23	8	16	16	8	134
Measles and rubella ..	1	1	..	..	..	..	..	..	2
Measles and tuberculosis ..	..	..	..	..	..	..	1	..	1
Measles and enteric fever ..	..	..	..	..	..	..	1	..	1
Measles and mumps ..	1	..	..	..	..	..	..	..	1
Whooping cough and chickenpox ..	..	8	..	3	..	4	..	1	16
Whooping cough and rubella ..	..	3	..	..	2	1	..	1	7
Whooping cough and tuberculosis ..	..	..	..	..	..	1	1	..	2
Whooping cough, chickenpox and measles ..	..	..	..	..	..	1	..	..	1
Whooping cough and mumps ..	..	..	..	..	..	1	..	..	1
Rubella and mumps ..	..	..	..	..	..	..	..	1	1
Rubella and chickenpox ..	..	..	..	..	..	..	..	1	1
Total	60	132	12	76	29	83	63	36	491

3. POST-SCARLATINAL DIPHTHERIA, 1911.

TABLE VII.—Sex distribution and mortality.

	Eastern.		North-Eastern.		North-Western.		Western.		South-Western.		Grove.		South-Eastern.		Brook.		Northern.		Southern.		Total.		Mortality per cent.
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Non-laryngeal cases	Males ..	3 ..	1 ..	1 ..	..	..	4 ..	..	4 ..	..	1 ..	..	7 ..	..	2 ..	..	9 ..	..	3 ..	..	34 ..	..	..
	Females	4 ..	1 ..	..	4 ..	..	4 ..	..	3 ..	..	2 ..	..	12 ..	..	4 ..	..	26 ..	..	16 ..	..	76 ..	..	..
	Total ..	7 ..	2 ..	2 ..	4 ..	4 ..	8 ..	..	7 ..	..	3 ..	..	19 ..	..	6 ..	..	35 ..	..	19 ..	..	110 ..	..	..
Laryngeal cases ..	Males ..	..	1	1	..	..	..	..	..	..	2	..	..	..	..	..	..	..	2	..	5	1	20.0
	Females	..	..	..	..	..	1 ..	..	..	..	..	..	..	..	..	..	2 ..	..	1	..	4	..	..
	Total ..	..	1	1	..	..	1	..	..	..	2	..	..	..	..	..	2 ..	..	3	..	9	1	11.1
All Cases ..	Males ..	3 ..	2	1	..	..	4 ..	..	4 ..	..	3 ..	..	7 ..	..	2 ..	..	9 ..	..	5 ..	..	39	1	2.5
	Females	4 ..	1	..	4 ..	..	5 ..	..	3 ..	..	2 ..	..	12 ..	..	4 ..	..	28 ..	..	17 ..	..	80	..	..
	Total ..	7 ..	3	1	4 ..	4 ..	9 ..	..	7 ..	..	5 ..	..	19 ..	..	6 ..	..	37 ..	..	22 ..	..	119	1	0.8

TABLE VIII.—Antitoxin treatment.

	Eastern.		North-Eastern.		North-Western.		Western.		South-Western.		Grove.		South-Eastern.		Brook.		Northern.		Southern.		Total.		Mortality per cent.
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	
Cases treated with antitoxin ..	4 ..	..	3	1	3	..	9 ..	..	7 ..	..	5 ..	..	10 ..	..	2 ..	..	35 ..	..	20 ..	..	98	1	1.0
Cases not so treated ..	3 ..	..	..	..	1	..	..	..	..	..	..	..	9 ..	..	4 ..	..	2 ..	..	2 ..	..	21	..	..
Total ..	7 ..	..	3	1	4	..	9 ..	..	7 ..	..	5 ..	..	19 ..	..	6 ..	..	37 ..	..	22 ..	..	119	1	0.8

4. SUMMARY OF THE ANTITOXIN TREATMENT OF DIPHTHERIA, 1911.

TABLE IX. *All forms of diphtheria except bacteriological diphtheria.*

Hospital.	Cases treated with antitoxin.		Cases not so treated.		Total.		
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Mortality per cent.
Eastern	389	32	11	2 ¹	400	34	8.5
North-Eastern.. ..	647	68	13	..	660	68	10.3
North-Western	492	56	81	1 ²	573	57	9.9
Western	570	66	76	4 ³	646	70	10.8
South-Western	483	44	7	..	490	44	9.0
Grove	501	39	18	1 ⁴	519	40	7.7
South-Eastern	642	49	45	2 ⁵	687	51	7.4
Brook	672	60	83	5 ⁶	755	65	8.6
Total.. .. .	4396	414	334	15	4730	429	9.06

Cases not treated with antitoxin.

1. One case was moribund on admission; the other came into hospital at a very late stage of the disease and died of paralysis.
2. The patient was moribund on admission.
3. All the four cases were moribund on admission.
4. This case was certified as a case of whooping-cough and died within 24 hours of admission. Membrane was found in the larynx *post mortem*.
5. The patients were moribund on admission.
6. One patient died in receiving room immediately on admission; the second, a tracheotomy case, died 15 minutes after admission; the third was admitted suffering from extensive paralysis, on the 42nd day of disease; the fourth was admitted on the 14th day of disease and died of cardiac failure; and the fifth was a mild case of nasal diphtheria fatal from pericarditis and pleurisy.

TABLE X. *Laryngeal cases.*

Hospital.	Cases treated with antitoxin.		Cases not so treated.		Total.		
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Mortality per cent.
Eastern	130	15	1	1	131	16	12.2
North-Eastern.. ..	98	18	..	..	98	18	18.3
North-Western	75	8	1	1	76	9	11.8
Western	134	24	1	1	135	25	18.5
South-Western	96	11	..	..	96	11	11.5
Grove	56	12	1	1	57	13	22.8
South-Eastern	157	20	3	2	160	22	13.7
Brook	107	19	2	2	109	21	19.2
Total.. .. .	853	127	9	8	862	135	15.65

TABLE XI.—*Showing day of disease on which treatment was commenced—summary of returns from all the hospitals (except the South Western where records were not kept).*

AGES.	Day of disease on which treatment began.										TOTAL.	
	1st.		2nd.		3rd.		4th.		5th & later.			
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Under 1	2	1	18	4	11	7	5	2	24	6	60	20
1 to 2	13	2	68	9	55	10	41	12	76	23	253	56
2 ,, 3	12	..	84	4	103	9	60	7	105	22	364	42
3 ,, 4	25	..	108	8	96	11	88	12	145	16	462	47
4 ,, 5	18	..	114	1	124	15	100	18	158	25	514	59
5 ,, 10	59	1	350	5	403	31	259	34	426	49	1,497	120
10 ,, 15	14	..	108	..	103	4	88	1	97	5	410	10
15 ,, 20	2	..	29	..	36	..	20	2	28	1	115	3
20 and upwards	4	..	32	..	50	1	46	1	57	3	189	5
Total	149	4	911	31	981	88	707	89	1,116	150	3,864	362

NORTH WESTERN.—One patient aged 6 years, who died, was stated by parents not to be ill until day of admission—There was thick membrane on both tonsils which looked older than the history indicated.

SOUTH EASTERN.—In addition to the above there were 2 cases, in which no evidence of the day of disease could be obtained ; both of them recovered.

BROOK.—In addition there were 16 cases in which it was impossible to determine the day of disease on which antitoxin was given ; two of these cases were fatal.

TABLE XII.—Operations for primary laryngeal diphtheria.

HOSPITALS.	Cases treated with antitoxin.				Cases not so treated.				TOTAL.				Mortality per cent. (all operations.)				
	Cases.		Deaths.		Cases.		Deaths.		Cases.		Deaths.						
	Tracheotomy only.	Intubation only.	Both operations.	Total.	Tracheotomy only.	Intubation only.	Both operations.	Total.	Tracheotomy only.	Intubation only.	Both operations.	Total.					
Eastern ..	18	27	13	58	5	..	8	13	1	1	..	1	6	8	14	23.7	
North-Eastern ..	55	..	..	55	16	..	..	16	..	..	..	..	16	..	16	29.2
North-Western ..	35	..	..	35	4	..	..	4	..	..	..	..	4	..	4	11.4
Western ..	62	..	..	62	18	..	..	18	..	..	..	..	18	..	18	29.0
South-Western ..	42	..	..	42	11	..	..	11	..	..	..	..	11	..	11	26.2
Grove ..	26	..	..	26	7	..	..	7	..	..	..	..	7	..	7	26.9
South-Eastern ..	44	..	..	44	13	..	..	13	1	1	..	1	45	..	14	31.3
Brook ..	12	29	7	48	4	4	6	14	1	1	..	1	13	4	15	30.6	
Total ..	294	56	20	370	78	4	14	96	3	3	297	56	20	373	26.5

In addition the following cases were operated upon before admission to Hospital:—

	Cases.				Deaths.				Cases.				Deaths.			
	Tracheotomy only.	Intubation only.	Both operations.	Total.	Tracheotomy only.	Intubation only.	Both operations.	Total.	Tracheotomy only.	Intubation only.	Both operations.	Total.	Tracheotomy only.	Intubation only.	Both operations.	Total.
Eastern	21	..	..	..	1	..	..	..	..	..	..	..	3
North-Eastern	10	..	..	..	1	..	..	..	..	..	..	..	2
North-Western	3	..	..	..	0	..	..	..	..	..	..	..	—
Western	6	..	..	..	3	..	..	..	..	..	..	..	10
South-Western	6	..	..	..	0	..	..	..	..	..	..	..	—
Grove	1	..	..	..	0	..	..	..	..	..	..	..	—

5. TRACHEOTOMY AND INTUBATION STATISTICS, 1911.

TABLE XIII.—*Number of cases and deaths at different ages of all cases of tracheotomy performed for primary diphtheria, also for other causes, at all hospitals, exclusive, however, of those cases which were previously intubated.*

AGES.	PRIMARY DIPHTHERIA.			SECONDARY DIPHTHERIA.			OTHER CAUSES.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1 ..	15	11	73·3	2	1	..	2	2	..
1 to 2 ..	50	18	36·0	3	3	..	4	3	..
2 „ 3 ..	64	22	34·4	2	2	..	2	1	..
3 „ 4 ..	48	8	16·6	..	..	..	4	3	..
4 „ 5 ..	48	7	14·6	2	2	..	3	2	..
5 „ 6 ..	37	6	16·2	..	..	..	3	2	..
6 „ 7 ..	19	5	26·3	..	..	..	1	1	..
7 „ 8 ..	9	3	33·0	..	..	..	..	..	..
8 „ 9 ..	1	..	0·0	1	..	..	..	..	..
9 „ 10 ..	1	..	0·0	..	..	..	..	..	..
Over 10 ..	5	1	20·0	..	..	..	1	1	..
Total ..	297	81	27·2	10	8	80·0	20	15	75·0

TABLE XIV.—*Number of cases and deaths at different ages of intubation performed for, primary diphtheria, and for other causes, at all hospitals, exclusive, however, of those cases which were previously tracheotomised.*

AGES.	PRIMARY DIPHTHERIA.			OTHER CAUSES.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1 ..	1	1	..	1	1	..
1 to 2 ..	6	1	..	..	..	..
2 „ 3 ..	7	..	..	5	1	..
3 „ 4 ..	13	..	..	3	2	..
4 „ 5 ..	17	1	..	1	..	..
5 „ 6 ..	6	..	..	..	..	..
6 „ 7 ..	3	..	..	..	..	..
7 „ 8 ..	1	1	..	..	..	..
8 „ 9 ..	1	..	..	..	..	..
9 „ 10 ..	1	..	..	..	..	..
Over 10 ..	..	..	..	..	..	..
Total ..	56	4	7·1	10	4	40·0

TABLE XV.—Number of cases and deaths of patients on whom intubation and tracheotomy were both performed.

AGES.	PRIMARY DIPHTHERIA.			OTHER CAUSES.		
	Cases.	Deaths.	Mortality per cent.	Cases.	Deaths.	Mortality per cent.
Under 1	2	1	..	..	..	..
1 to 2	4	4	..	2	2	..
2 „ 3	5	3	..	..	..	..
3 „ 4	3	1	..	..	..	..
4 „ 5	3	3	..	1	..	..
5 „ 6	1	..	..	..	..	..
6 „ 7	1	1	..	..	..	..
7 „ 8 .. ..	..	..	..	..	..	..
8 „ 9	1	1	..	..	..	..
9 „ 10 .. ..	..	..	..	..	..	..
Over 10 .. ..	..	..	..	..	..	..
Total	20	14	70.0	3	2	66.7

6. LAPAROTOMIES FOR PERFORATION IN ENTERIC FEVER PERFORMED DURING 1911.

TABLE XVI.

Hospital at which operation was performed.	Sex.	Age.	Period of illness.	Length of time between perforation and operation.	Condition of abdomen.	Nature of operation.	Result.	Remarks.
Eastern ..	F.	13	26th day	..	Acute peritonitis, a large amount of faecal pus. Two perforations, too large to close, about a foot above valve.	Peritoneal cavity swabbed out; drainage tubes inserted, Perforated bowel stitched to edges of wound Right iliac incision	Death, 30 hours later.	A very severe case of enteric fever; abdomen distended for several days before operation. Rigidity and tenderness a few hours before operation.
North-Eastern ..	M.	29	26 days	6 hours	Pinpoint perforation in ileum, 1 foot from ileocaecal valve. Gas and slightly turbid fluid in abdomen; no smell: some lymph round perforation and adjacent coils of intestines. Intestine much injected.	Gut invaginated by two layers of Lembert's sutures. Pelvis swabbed. Drainage tube down to pelvis. Abdominal wound closed.	Died 4 days after operation.	P.M. No exudation; a few flakes of lymph here and there. The middle stitch of the outer layer of Lembert's sutures found to pass through an adjacent ulcer and into the intestinal canal.
	F.	37	17 days	3 hours after	Perforation size of a pea in ileum 6 inches from ileo valve with slough plugging up the orifice. Tissue at base of ulcer very swollen and indurated. No gas present, but a little brown fluid free from smell.	Perforation invaginated by two layers of Lembert's sutures. Abdomen swabbed out and drainage tube down to Douglas's pouch. Abdominal wound closed.	Died 15 days after operation.	9 days after operation stitches removed owing to formation of stitch abscesses. Wound strapped. P.M. Wound in a sloughy condition, but shut off from peritoneal cavity. Intestines matted together. No pus except in Douglas's pouch, which contained about 5 ozs. of greenish pus. Perforation healed. Right lung showed several patches of consolidation breaking down into pus. Lymph on surface of both lungs.

TABLE XVI—continued.

South-Eastern ..	F.	13	27th day	..	About 4 or 5 hours.	Perforation found a few inches above caecum. Very little extravasation.	Lembert's sutures. Swabbing. No drainage.	Recovery ..	A faecal fistula was established by the 9th day and persisted for 3 months. Finally healed without secondary operation.
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TABLE XVII.
LAPAROTOMY FOR SUPPOSED PERFORATION.

Hospital at which operation was performed.	Sex.	Age.	Period of illness.	Length of time between first symptom and operation.	Condition of abdomen.	Nature of operation.	Result.	Remarks.	
Eastern ..	M.	42	16th day	..	About 3 hours after first symptom of perforation.	Nothing found but marked injection of several coils of intestines.	Right iliac incision. No swabbing or drainage.	Death 15 hours later.	A very severe case of enteric fever. At the autopsy a perforation was found a foot above the valve. There was gas and foul smelling fluid in peritoneal cavity. The perforation must have occurred after the operation.
	F. (Assistant nurse at E. Hospital).	24	23rd day	..	1½ hours after first symptom.	Nothing found but intense injection (like early peritonitis) of about 4 inches of small intestine.	Right iliac incision. Abdominal walls sewn up. No swabbing or drainage.	Recovery ..	The symptoms pointed most strongly to perforation. They occurred as patient was beginning to convalesce. Recovery uninterrupted, except by an attack of asthma.
North-Western ..	M.	39	42nd day	..	41½ hours ..	Early acute peritonitis, lymph over 3 ulcers. A little clear fluid in peritoneal cavity. No perforation found.	Each ulcer covered with pieces of omentum.	Death, 5 days after operation.	P.M. Localised purulent peritonitis. Small perforating ulcer with leakage from margin of patch of omentum. General peritoneum healthy. Little clear fluid in pelvis.

7.—DETAILS OF MISCELLANEOUS DISEASES ADMITTED DURING 1911; ALSO OF DEATHS DURING 1911.

TABLE XVII.—Summary for all Fever Hospitals.

Number of disease according to the Royal College of Physicians' nomenclature of diseases.	Disease diagnosed in hospital.	Cases admitted.										Deaths.												
		Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified rubella.	Certified acute poliomyelitis.	Certified Cholera.	Uncertified.	Total.	Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified acute poliomyelitis.	Uncertified.	Total.	
6	<i>Infective diseases—</i>																							
8	Chickenpox	28	1	..	..	..	4	1	..	..	..	34	..	1	..	..	..	..	..	..	..	..	..	1
12	Vaccinia	2	..	4	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
14	Endocarditis, infective ..	..	6	12	..	..	..	..	..	2	..	7	..	..	..	..	..	..	..	..	..	..	..	..
18	Enteritis, infective ..	182	2	..	..	..	219	..	14	..	..	20	..	2	..	..	..	..	..	..	..	..	..	3
20	Rubella .. ..	..	..	..	..	..	..	..	..	..	..	417	..	..	..	..	..	..	..	..	..	..	..	..
21	Gonorrhœa	1	1	15	1	..	..	..	..	..	..	18	..	..	..	1	..	..	..	..	..	..	..	..
25	Influenza .. ..	..	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
28	Malaria	1	2	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..	..	..
29	Mumps	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
32	Periostitis, acute infective ..	25	14	39	3	..	1	1	..	..	..	84	1	9	12	..	..	..	..	..	..	..	..	1
33	Pneumonia .. ..	..	1	4	..	..	2	..	..	..	..	5	..	1	2	..	..	..	..	..	..	..	..	22
34	Pyæmia	11	3	14	..	..	..	..	..	..	..	30	..	..	..	..	..	..	..	..	..	..	..	3
37	Pyrexia of uncertain origin ..	1	1	3	..	..	..	..	..	..	..	5	..	..	..	..	..	..	..	..	..	..	..	..
39	Rheumatism .. ..	..	1	1	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..
41	Septicæmia .. ..	..	1	1	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..
42	Smallpox	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
44	Syphilis	1	7	..	..	..	..	..	..	..	..	8	..	..	..	..	..	..	..	..	..	..	..	..
..	Tuberculosis, general ..	1	3	1	1	..	1	..	..	..	..	7	1	3	2	..	1	1	..	..	..	..	..	7
..	" miliary .. ..	..	..	2	1	1	..	..	..	..	..	4	..	..	2	..	1	1	..	..	..	..	..	4
..	Tuberculous mesenteric glands ..	1	1	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	1
..	" peritonitis	2	..	2	..	..	..	..	..	..	..	4	..	..	..	..	..	..	..	..	..	..	..	..
..	" meningitis	2	3	4	1	..	1	1	..	..	..	13	2	2	4	..	1	..	1	1	1	..	12	
..	" enteritis .. ..	..	1	1	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	..	..	..
..	" ulceration of palate ..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
..	" ulceration of pharynx ..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
61	<i>Other general diseases.</i>	..	2	1	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..
64	Anæmia .. ..	..	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
75	Chlorosis	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
..	Purpura .. ..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..
..	Carried forward	262	51	105	7	1	228	3	14	2	2	675	7	20	29	3	1	1	1	1	1	..	..	63

TABLE XVII.—Summary for all Fever Hospitals (continued).

Number of disease according to the Royal College of Physicians' nomenclature of diseases.	Disease diagnosed in hospital.	Cases admitted.											Deaths.										
		Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified rubella.	Certified acute poliomyelitis.	Certified Cholera.	Uncertified.	Total.	Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified acute poliomyelitis.	Uncertified.	Total.
	Brought forward	262	51	105	7	1	228	3	14	2	2	..	675	7	20	29	3	1	1	1	1	..	63
	<i>Certain morbid conditions incident to various parts—</i>																						
	Carcinoma of duodenum ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
80	Thrush (mouth) ..	..	..	..	..	..	2	1	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
82	Scabies ..	1	..	..	..	..	..	..	..	..	..	..	4	..	..	..	..	..	..	..	..	..	..
82	Phthiriasis ..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
82	Tape-worm ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
85	Drug rash ..	2	..	..	..	..	1	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..
85	Ptomaine Poisoning ..	..	1	1	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of the nervous system—</i>																						
	Multiple neuritis (alcoholic) ..	..	..	1	2	..	..	..	..	..	1	..	1	..	..	1	..	..	..	1	..	..	1
86	Acute anterior poliomyelitis ..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	1
90	Meningitis ..	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
97	Cerebral hæmorrhage ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
101	Epilepsy ..	..	..	..	1	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	1
124	Laryngismus stridulus ..	..	2	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..
126	Migraine ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
128	Mania ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
145		..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of the eye—</i>																						
	Conjunctivitis ..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
166	Blepharitis ..	..	..	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
239																							
	<i>Diseases of the ear—</i>																						
	Otitis media, etc. ..	6	2	3	..	..	2	1	..	..	..	..	14	..	..	1	..	..	..	..	..	..	1
265																							
	<i>Diseases of the nose—</i>																						
	Rhinitis ..	5	7	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..
277																							
	Carried forward	276	64	115	10	1	237	5	14	3	2	..	727	7	21	31	3	1	2	1	1	..	67

Details of miscellaneous diseases admitted during 1911; also of deaths during 1911 (continued).

TABLE XVII.—Summary for all Fever Hospitals (continued).

Number of disease according to the Royal College of Physicians' nomenclature of diseases.	Disease diagnosed in hospital.	Cases admitted.										Deaths.											
		Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified rubella.	Certified acute poliomyelitis.	Certified Cholera.	Uncertified.	Total.	Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified acute poliomyelitis.	Uncertified.	Total.
	Brought forward	276	64	115	10	1	237	5	14	3	2	..	727	7	21	31	3	1	2	1	1	..	67
	<i>Diseases of the circulatory system—</i>																						
293	Morbus cordis .. ..	..	..	2	..	..	..	..	..	..	..	..	2	..	..	1	..	..	..	..	..	..	1
295	Fatty degeneration of the heart .. ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	1
324	Phlebitis .. ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	1
	<i>Diseases of the respiratory system—</i>																						
339	Laryngitis	2	47	..	..	..	10	12	..	..	..	..	49	..	2	1	..	..	..	2	..	..	5
404	Bronchitis	7	18	4	..	..	6	5	..	..	..	..	51	..	14	..	..	..	3	3	..	..	21
413	Broncho-pneumonia	14	22	1	..	..	..	..	..	..	..	..	48	1	..	..	1	..	..	..	..	..	1
419	Phthisis .. ..	..	1	1	1	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	1
425	Pleurisy .. ..	..	1	8	..	..	..	..	..	..	..	..	9	..	..	1	..	..	..	..	..	..	1
426	Empyema	2	1	2	..	..	..	..	..	..	..	..	5	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of the digestive system—</i>																						
436	Stomatitis	12	4	..	..	..	3	..	..	..	..	..	19	..	1	..	..	..	..	..	..	..	1
438	Stomatitis, gangrenous .. ..	..	1	..	..	..	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	..	1
440	Dentition	2	..	..	..	..	3	..	..	..	..	..	5	..	..	..	..	..	..	..	..	..	..
451	Periostitis of jaws .. ..	..	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
466	Glossitis	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
474	Ulceration of fauces .. ..	..	72	..	..	..	1	..	..	..	..	..	72	..	6	..	..	..	..	..	..	..	6
475	Tonsillitis	140	485	..	..	..	..	..	..	..	..	..	627	..	2	..	..	..	..	..	..	..	2
483	Pharyngitis	2	2	..	..	..	1	..	..	..	..	..	4	..	2	..	..	..	..	..	..	..	3
484	Post-pharyngeal abscess	2	19	..	..	..	1	..	..	..	..	..	22	..	2	..	..	..	1	..	..	..	..
489	Gastritis	1	2	7	2	..	1	..	..	..	..	..	13	..	..	..	..	..	..	..	..	..	..
490	Gastric ulcer .. ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
499	Dyspepsia	1	1	1	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..
515	Appendicitis .. ..	..	..	10	..	..	..	..	..	..	..	..	10	..	..	2	..	..	..	..	..	..	2
..	Colitis, ulcerative .. ..	..	..	1	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	1
..	Enteritis	1	1	1	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..
	Carried forward	463	742	156	13	1	262	22	14	3	2	1	1,679	8	49	38	4	1	6	6	1	..	113

Details of miscellaneous diseases admitted during 1911; also of deaths during 1911 (continued).

TABLE XVII.—Summary for all Fever Hospitals (continued).

Number of disease according to the Royal College of Physicians' nomenclature of diseases.	Disease diagnosed in hospital.	Cases admitted.										Deaths.											
		Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified rubella.	Certified acute poliomyelitis.	Certified cholera.	Uncertified.	Total.	Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified acute poliomyelitis.	Uncertified.	Total.
	Brought forward	463	742	156	13	1	262	22	14	3	2	1	1,679	8	40	38	4	1	6	6	1	..	113
	<i>Diseases of the digestive system—continued—</i>																						
540	Diarrhœa	..	1	2	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..
541	Constipation	..	..	4	..	..	..	..	..	..	..	..	4	..	..	..	..	..	..	..	..	..	..
544	Colic	..	..	4	..	..	..	..	..	..	..	..	4	..	..	..	..	..	..	..	..	..	..
556	Hæmorrhoids	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
581	Gall-stones	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
588	Peritonitis	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of the lymphatic system—</i>																						
605	Adenitis, cervical	8	3	..	..	..	1	..	..	..	..	12	..	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of urinary system—</i>																						
651	Nephritis	5	3	2	..	..	..	..	..	..	..	10	1	1	1	1	..	..	..	..	..	..	3
654	Pyonephrosis	..	..	1	..	..	..	..	..	..	..	1	..	..	..	1	..	..	..	..	..	..	1
655	Pyelitis	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
676	Cystitis	..	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of generative system—</i>																						
798	Vaginitis	2	..	..	..	..	..	..	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of organs of locomotion—</i>																						
903	Arthritis (knee)	..	..	1	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of connective tissue—</i>																						
952	Cellulitis (neck)	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	..
	<i>Diseases of the skin—</i>																						
959	Erythema (various forms)	201	1	..	..	..	27	..	..	..	..	230	2	..	..	..	..	..	..	..	..	..	2
960	Urticaria	4	1	..	..	..	2	..	..	..	..	7	..	..	..	..	..	..	..	..	..	..	..
	Carried forward	683	753	174	13	1	292	22	14	3	2	2	1,959	11	50	40	4	1	6	6	1	..	119

Details of miscellaneous diseases admitted during 1911; also of deaths during 1911 (continued).

TABLE XVII.—*Summary for all Fever Hospitals (continued).*

Number of disease according to the Royal College of Physicians' nomenclature of diseases.	Disease diagnosed in hospital.	Cases admitted.										Deaths.											
		Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified rubella.	Certified acute poliomyelitis.	Certified Cholera.	Uncertified.	Total.	Certified scarlet fever.	Certified diphtheria.	Certified enteric fever.	Certified cerebro-spinal fever.	Certified typhus fever.	Certified measles.	Certified whooping cough.	Certified acute poliomyelitis.	Uncertified.	Total.
	Brought forward	683	753	174	13	1	292	22	14	3	2	2	1,959	11	50	40	4	1	6	6	1	.	119
	<i>Diseases of the skin—continued—</i>																						
962	Eczema	2	1	..	..	..	1	1	..	..	..	..	4	..	..	..	..	..	..	..	..	..	..
963	Impetigo	2	1	1	..	..	1	1	..	..	..	..	6	..	..	..	..	..	..	..	..	..	..
975	Dermatitis exfoliativa	5	..	..	..	..	..	..	..	..	..	..	5	..	..	..	..	..	..	..	..	..	..
976	Pityriasis rosea	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
978	Ichthyosis	6	..	..	..	..	..	..	..	..	..	..	6	..	..	..	..	..	..	..	..	..	..
979	Keratosis pilaris	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
988	Xeroderma pigmentosa	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
1008	Sweat rash	..	2	..	..	..	1	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
1024	Whitlow	1	..	..	..	..	..	..	..	..	..	..	3	..	..	..	..	..	..	..	..	..	..
—	Ulcer of leg	1	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
	<i>Injuries—</i>																						
1025	Scalds, burns, etc.	2	..	..	..	..	..	1	..	..	..	..	3	1	..	..	..	..	..	..	..	..	1
1103	Wound of palate	..	1	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
	<i>Miscellaneous—</i>																						
—	Marasmus	1	1	..	..	..	2	..	..	..	2	..	4	..	1	..	..	..	..	..	..	..	1
—	No obvious disease	137	24	10	..	..	21	13	..	1	..	..	208	..	..	..	..	..	..	..	..	..	..
—	Pseudocyesis	..	..	1	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..
—	Senile decay	..	..	1	..	..	..	..	..	..	..	..	1	..	..	1	..	..	..	..	..	..	1
—	Admitted with mother	..	..	..	..	..	..	..	..	..	..	..	20	..	..	..	..	..	..	..	..	..	..
—	Admitted with baby	..	..	..	..	..	..	..	..	..	..	11	11	..	..	..	..	..	..	..	..	..	..
	Totals	843	783	187	13	1	318	37	14	4	4	33	2,237	12	51	41	4	1	6	6	1	..	122

TABLE XVIII. Showing in summary the numbers as admitted into the several hospitals.

Disease as certified on admission.	EASTERN HOSPITAL.		NORTH- EASTERN HOSPITAL.		NORTH- WESTERN HOSPITAL.		WESTERN HOSPITAL.		SOUTH- WESTERN HOSPITAL.		GROVE HOSPITAL.		SOUTH- EASTERN HOSPITAL.		BROOK HOSPITAL.		TOTAL.	
	No. of cases.	No. of deaths.	No. of cases.	No. of deaths.	No. of cases.	No. of deaths.	No. of cases.	No. of deaths.	No. of cases.	No. of deaths.	No. of cases.	No. of deaths.	No. of cases.	No. of deaths.	No. of cases.	No. of deaths.	No. of cases.	No. of deaths.
Scarlet fever ..	77	3	167	2	98	2	72	3	71	1	123	1	145	..	90	..	843	12
Diphtheria ..	190	20	134	7	114	7	85	9	46	2	78	2	65	1	71	3	783	51
Enteric fever ..	51	7	13	3	38	9	21	4	33	9	..	..	31	9	..	..	187	41
Measles ..	107	2	22	..	63	2	40	1	17	1	8	..	23	..	38	..	318	6
Rubella ..	..	..	..	..	..	..	1	..	13	..	..	..	..	..	..	..	14	..
Whooping cough	..	..	9	2	..	..	8	1	..	..	1	1	15	2	..	..	37	6
Typhus fever ..	..	..	..	..	..	..	1	1	..	..	..	..	..	..	..	..	1	1
Cerebro-spinal fever	1	1	2	..	..	..	5	1	2	..	3	2	..	..	..	..	13	4
Anterior acute poliomyelitis	..	..	..	..	..	..	2	1	1	..	1	..	..	..	..	..	4	1
Cholera ..	4	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	4	..
Uncertified ..	3	..	9	..	5	..	..	..	..	..	7	..	7	..	2	..	33	..
Total ..	433	33	356	14	318	20	235	21	183	13	225	6	286	12	201	3	2,237	122

8.—REPORT ON ONE YEAR'S EXPERIENCE OF DR. MILNE'S INUNCTION TREATMENT FOR SCARLET FEVER.

BY F. M. TURNER, M.D.,

Medical Superintendent of the South-Eastern Hospital.

A Report to the Hospital Sub-Committee.

Dr. Milne, Medical Officer to Dr. Barnardo's Homes, published a letter in the British Medical Journal on October 31st, 1908, advocating the use of eucalyptus oil rubbed all over the skin in scarlet fever cases, and carbolic oil rubbed on the throat. By this treatment he claimed to have abolished the necessity of isolation in scarlet fever and also to have favourably influenced the course of the disease. He further advocated this treatment in subsequent letters and more recently has read a paper on the subject before the Epidemiological Section of the Royal Society of Medicine and published a small book.

I was sufficiently impressed with the evidence presented by him to go and see some of his cases at Her Majesty's hospital, Stepney, and I then determined to give the method a trial here. The chief points in his case that impressed me were the following :—

1. Dr. Milne had treated many scarlet fever cases in the ordinary surgical wards of a general children's hospital, without spread of the disease except for one small outbreak. Surgical cases are generally believed to be very susceptible to infection, especially when children.

2. He also treated many cases in private and in large children's homes. Curgenvin and others who had previously claimed to disinfect scarlet fever patients with eucalyptus, or otherwise, had only brought forward evidence in private cases; in which it is possible to assume that no infection had taken place among brothers and sisters because of the unsusceptibility of those exposed, and to assume that infection from the treated case had spread outside the home but had not been traced. In Dr. Milne's evidence the patients with scarlet fever, say, after ten days treatment, were allowed to mingle freely with other children in a large institution. The number of children in one of Dr. Barnardo's homes is too great to allow the assumption that all could have been insusceptible, and the fact that they were all residents, and formed a large self-contained population under the charge of a permanent medical officer, precludes the view that any infection could occur and remain overlooked.

The following is the account of my experiments here with the inunction treatment :—

On March 22nd I opened a small ward of ten beds for scarlet fever and doubtful cases; about a fortnight later I moved them to a larger 20-bed ward, No. 1-B. Into the latter I sent all the doubtful cases, such as had formerly been kept isolated in single rooms so long as the diagnosis remained uncertain. Many of these turned out to be true scarlet fever cases, others were discharged without shewing any real evidence of that disease, and so far as I could ascertain had never had scarlet fever. There was no attempt to keep the cases apart.

When up they dined at the same table, played together and borrowed each others toys, and mixed in every way usual to children in a large ward. The non-scarlet fever cases were therefore constantly exposed to infection from those who though at first considered doubtful afterwards proved to be genuine cases. In addition I freely admitted ordinary unselected cases of scarlet fever into the ward whenever there was room, and the experiment may be taken as a test, how far scarlet and non-scarlet fever patients can be allowed to mix together with impunity when treated according to Dr. Milne's recommendations. In this ward between March 22nd, 1909, and March 31st, 1910, there were admitted 204 patients of whom 141 were certain cases of scarlet fever, 20 cases with doubtful symptoms but probably mild cases of scarlet, and 40 were not scarlet fever. On June 3rd, 1909, I asked Dr. Lakin to commence the treatment in one of his wards, No. 1-A, partly to get an independent opinion, partly to increase the number of cases under observation. In this latter ward there were treated 126 cases of whom 105 were certain cases of scarlet fever, 7 were doubtful, and 14 were not scarlet.

I have also used the eucalyptus treatment in the diphtheria wards. Scarlet fever not infrequently breaks out in them. Cases are very common also, in which a scarlatiniform rash breaks out with few or no other symptoms. Diagnosis is very difficult in these cases and when made is sometimes found to be erroneous. In many of these cases, several of which were proved to be true scarlet I adopted the inunction treatment instead of isolating the patient.

According to Dr. Milne the non-scarlet patients in 1-A and 1-B should have been protected against infection and also the diphtheria cases in such wards as had one or more scarlet cases in them. Also the individual scarlet fever cases should have been free from infection in ten days, if not sooner; consequently no return cases should have arisen in their homes after their discharge, however early this had taken place.

These predictions were not verified by experience, but on the other hand the prevalent views as to the infectivity of scarlet fever would have led most expert critics to prophesy a very large amount of infection to take place among those exposed, even if all did not contract the disease. The facts were further removed from this expectation than from the other.

The following cases will illustrate the favourable results :—

1. L.C.M., age 2. Admitted to ward 1-B on November 19th, 1909, certified scarlet fever. On admission there was seen a faint punctate rash, but in the opinion of two doctors the diagnosis was uncertain. On November 25th and 28th I was able to find a little peeling of the skin, but not at any other time, and on December 7th, I discharged him home with the diagnosis Erythema.

He was thus exposed to infection for 13 days without contracting the disease. His brother H.M. was admitted here on November 18th with genuine scarlet fever and discharged on January 28th. On February 3rd, L.C.M. was re-admitted here with a well-marked scarlet fever rash, followed by definite peeling. This proves him to have been a susceptible subject, and if one case could prove the reliability of the method, would substantiate the value of the inunction.

2. In August, 1909, a small outbreak of scarlet fever occurred in a diphtheria ward, No. 9-B. Two cases occurred on August 25th, and were diagnosed and isolated the next day. A third case occurred on the 26th and was at once isolated. On August 27th, I ordered all the children in that ward to be oiled for ten consecutive days. Six days later, on September 2nd, one of them, I.M., age 4, was attacked with scarlet fever. Instead of isolating her with the others I ordered the oiling to be kept up a further ten

days. She had a very severe attack followed by severe nephritis, and I thought she might die. No infection spread from her, at any rate for two and a half months, although the ages of the other children and the known susceptibility of diphtheria convalescents to scarlet infection would have led one to expect this. She was discharged recovered on November 18th. Another child G.J., who was admitted to the ward with diphtheria on October 9th, developed scarlet on November 8th, possibly from I.M., but if so after a month's exposure to risk.

The ages of the 13 children were as follow :—

0-1 years, 1 case	3-4 years, 2 cases
1-2 „ 2 cases	4-5 „ 2 cases
2-3 „ 1 case	5-6 „ 2 cases
	6-7 „ 3 cases

We may therefore count on a certain degree of immunity from risk under this treatment, but the protection is not complete as shewn by the following cases :—

3. The child, G.J., mentioned above was attacked with scarlet fever on November 8th, and was oiled and allowed to remain in the ward. On November 17th one, November 18th two, and November 19th one other child were successively attacked. The first three were isolated on the 18th and the last on the 19th, and no further case arose.

Statistical results.—Single cases therefore give inconsistent results ; it remains to estimate the value of the treatment from the proportion of successes to failures.

1. *Infection within the wards.*—Into wards 1-A and B, there were admitted 330 children and adults, of whom 57 did not have scarlet fever on admission, so far as the evidence in such cases permits me to judge. Of these 6 contracted the disease, or 10·5 per cent.

I have in my report to you dated December 6th, 1909, shewn that the rate for cases treated here in the older method by isolation in single rooms in three consecutive years was 2·5, 10·2 and 3·0 per cent, or on the average of three years, 6·5 per cent.

I therefore consider that the result, though not as good as I had hoped for, gives a protection about as great as that obtained here previously by isolation, but not as good as those claimed by other superintendents who have had experience with cubicle wards of modern construction. I therefore propose to continue the experiment, but in a modified form.

2. *Return cases.*—The results as regards return cases, length of stay in hospital, complications, and cost are also interesting though not so important as the above.

Ten outbreaks of scarlet fever were reported as occurring in the homes to which these cases were discharged. As the total number of scarlet fever cases discharged was 226 including all doubtful cases, the infectivity rate was 4·4 per cent. The infectivity rates for this hospital for all scarlet fever, including doubtful cases, for the four years 1906-9 inclusive were 3·8, 2·7, 3·8 and 5·3 per cent. respectively, or 4·0 per cent. for the mean of the whole period. There was therefore no definite reduction in return cases as a result of the treatment. Nor was there any definite rise although many cases were sent out much sooner than I should have sent them in previous years.

3. *Detention*.—The average detention of all the scarlet cases including doubtfuls was 44·5 days. That for all scarlet fever cases, including doubtfuls treated up to discharge at this hospital during 1909 was 57·4 days, nearly a fortnight longer. Part of this saving in length of treatment was due to the larger number of doubtful, and therefore mild cases, included in the former figure, but most was due to my discharging cases from the eucalyptus wards at an early date more freely than I could have done from other wards. The average detention, excluding doubtful cases was 45·8 days.

4. *Complications*.—Albuminuria generally of slight amount and short duration occurred in 15 per cent. of the cases, and otitis in 13·2 per cent. Both rates are higher than usual at this hospital. The increased incidence of these two complications is accounted for by the young average age of the children treated. A list of all the important complications is given in table III. It is quite plain from this table that the treatment had no effect upon the complications in either direction.

5. *Cost*.—The cost of eucalyptus oil used was £11 0s. 8d. As a rule no extra nurses were employed in these two wards, so the extra trouble in nursing cannot be valued. A very large saving of course resulted from the shorter stay in hospital which I felt justified in requiring.

6. *Summary*.—In the previous paragraphs I have tried to present an accurate and therefore impartial account of the results of my experiment. I cannot however, close this report without stating my own view as to how far the claims of Dr. Milne have been substantiated or the reverse by my experience here. As regards the immunity against infection which he claims to be absolute or almost, no absolute immunity was obtained here. On the other hand out of 57 cases exposed to infection 51 escaped, a much larger proportion than most experts would have thought possible before this treatment was published. Some critics have suggested that the same degree of immunity would have been obtained without the use of eucalyptus or any other drug, in which case isolation of scarlet fever cases is just as unnecessary as Dr. Milne claims it to be. I confess that this view seems to me not improbable, though I have not yet felt justified in acting upon it.

Dr. Milne also claims that the treatment modifies the course of the disease and reduces both the mortality and the complications. In my own cases I have seen no modification whatever, and I expect that Dr. Milne bases his opinion upon the much better results that he sees now than in his own practice ten or twenty years ago. Within this period there has been also an enormous reduction in mortality and in severity of the cases treated in the Asylums Board hospitals and elsewhere, apart from any specific treatment, and if Dr. Milne put his results into statistical form I suspect that his results would be found parallel to those obtained everywhere.

I append several statistical tables.

I have to acknowledge the help I have received from Dr. Lakin in this experiment.

(Signed) F. M. TURNER,
4th July, 1910.

TABLE I.—*Summary of cases treated.*

Disease.	Discharged.	Transferred.	Died.	Total.
Scarlet fever	194	47	5	246
Doubtful cases	27	..	..	27
Not scarlet ever	51	..	..	51
Cases who caught scarlet fever in hospital ..	5	1	..	6
Total	277	48	5	330

TABLE II.—*Length of detention in hospital (discharged cases only).*

Week.	Scarlet cases.	Doubtful.	Not scarlet.	Scarlet caught in hospital.	Total.
0-1 ..	..	..	5	..	5
1 ..	2	3	13	..	18
2 ..	10	7	19	..	36
3 ..	17	3	8	..	28
4 ..	37	9	2	..	48
5 ..	38	2	3	1	44
6 ..	28	..	..	..	28
7 ..	20	..	1	1	22
8 ..	4	1	..	..	5
9 ..	10	1	..	..	11
10 ..	4	1	..	..	5
11 ..	8	..	..	1	9
12 ..	5	..	..	1	6
13 ..	7	..	..	1	8
14 ..	2	..	..	..	2
15-16 ..	1	..	..	..	1
18-19 ..	1	..	..	..	1
Total ..	194	27	51	5	277

The usual period of discharge for scarlet fever cases was, therefore, from 4 to 6 weeks, for doubtful cases from 2 to 5 weeks, and for the non-scarlet cases under 3 weeks. Cases detained for a longer period than these generally had some complication, in over half, this was a discharge from nose or ears. The longest case of all was detained for a mastoid abscess, and several for chickenpox, diphtheria, or other disease contracted in hospital. It would be easy to exclude these and give the period of detention for uncomplicated cases only, but then the results would not be comparable with the statistics published by the Asylums Board for previous years.

TABLE III.—Complications.

	Eucalyptus cases.		S.E.H. cases, 1909.	M.A.B. all hospitals, 1909.
Total number of cases treated	..	279	1,591	16,191
Complication.	No. of Cases.	Rate per cent.	Rate per cent.	Rate per cent.
Otitis	37	13.2	11.5	12.70
Albuminuria	42	15.0	9.6	9.32
Nephritis	19	6.8	6.5	5.61
Adenitis (simple)	22	7.9	6.8	7.68
„ (suppurative)	9	3.2	1.9	0.83
Cervical cellulitis	1	0.3	0.5	0.25
Rheumatism	4	1.4	2.9	3.88
Secondary tonsillitis	4	1.4	1.9	1.65
Relapse	1	0.3	0.6	1.98

9 cases contracted a second disease in hospital, 5 chickenpox, 2 whooping-cough, 1 diphtheria, and 1 rubella. The eucalyptus did not appear to have any influence on these diseases. An outbreak of chickenpox occurred in 1-B in August, 1909, and was sufficiently prolonged to require closing of the ward and re-opening with fresh cases. In May and June, 1910, an outbreak of rubella occurred in 1-A which also necessitated the closing of the ward. Only one of the children affected appears in the above statistics, as the others were all admitted after April 1st.

9.—THE TREATMENT OF SCARLET FEVER ON ASEPTIC LINES. REPORT ON THE WORKING AND ON THE RESULTS OBTAINED IN THE EXPERIMENTAL WARDS 5A AND 5B AT THE SOUTH EASTERN HOSPITAL.

By A. F. Cameron, M.D., Senior Assistant Medical Officer, South Eastern Hospital.

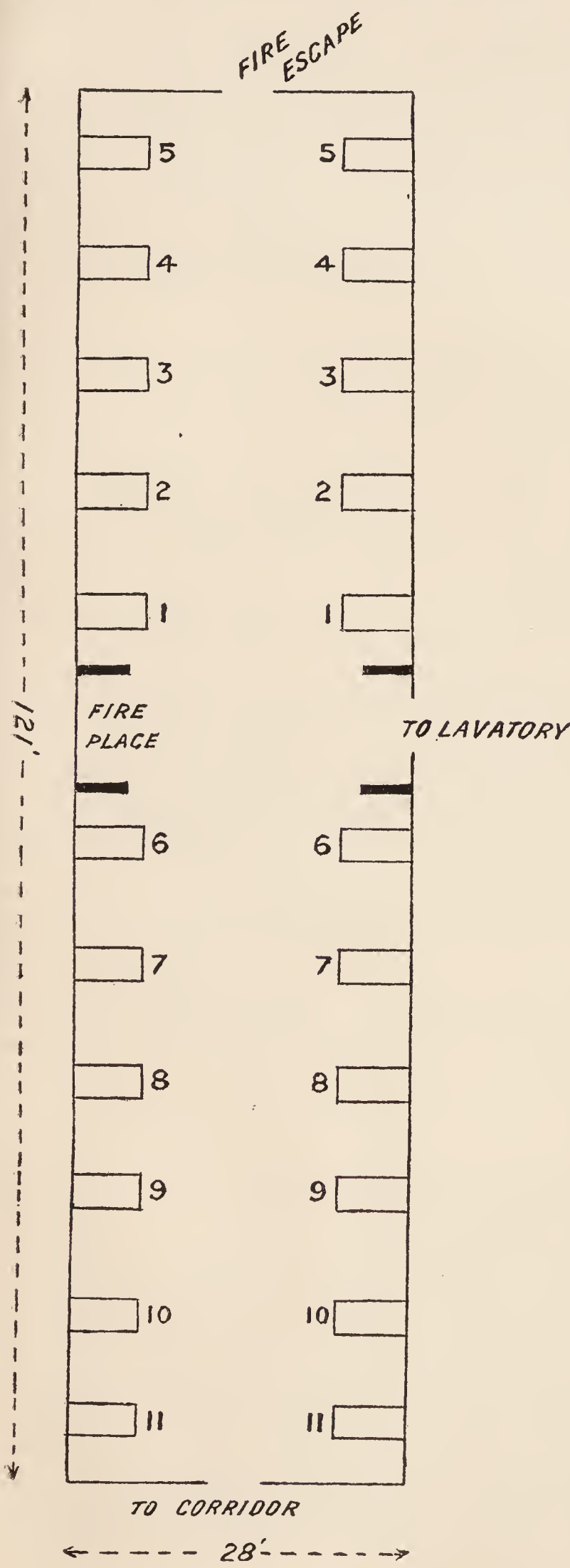
The experiment of which the following report sets out the statistical results, had its origin in recent discussions on improved methods of hospital treatment of infectious diseases in general and of scarlet fever in particular. Medical opinion on this subject has tended as a result of these discussions, to diverge, on the one hand towards advocating the necessity for the provision of a very large proportion of true isolation accommodation in infectious fever hospitals and on the other towards the view that by the adoption of adequate precautions in internal administration, it might be possible to supervise successfully several infections not only in the same hospital unit, but also without the assistance of any physical barrier or separation of one infection from the other. From the point of view of administrative expense, it is evident that the two methods must be antagonistic, that the former tends towards the gradual supersession of the present segregation method of dealing with infectious diseases by a system of true isolation with increased expense in the provision of adequate buildings and staff, while the latter method, if successful, would permit of present buildings being adapted to the improved conditions of treatment by the provision, at moderate cost, of an improved equipment and a small augmentation of the nursing staff.

If the second method were adopted in its entirety, as has been advocated by Milne and others, one would have to face the possibility that an imperfection in the arrangements or in the carrying out of the important details of the system might lead to a failure perhaps disastrous in its results. If, for example, cases of scarlet fever had been knowingly treated in a ward along with cases of measles or of varicella, with no physical barrier between them, it would be impossible to argue, in the event of failure, that all reasonable precautions had been adopted unless one were prepared to maintain that the infections of measles and of varicella have no power of attack over an intervening air-space. Such a view is not in accordance with experience of outbreaks of these diseases in the wards of a fever hospital. If this mode of spread of measles and varicella cannot be excluded, the method of treating these diseases along with other infections cannot be justified. If it can be excluded, the high power of contagion which measles and varicella possess, must throw an undue burden of responsibility on the medical and nursing staff when the method is adopted.

In view of these considerations it was determined to limit the experiment to cases of certified scarlet fever in which the diagnosis had been confirmed in the receiving room. An attempt was made to arrange the administration of the two wards to which they were admitted, in such a way that each patient would be treated as if he were in an isolated compartment. The method was designed to carry into practice, as far as the conditions of a segregation ward will allow, the principles of asepsis as applied to the treatment of scarlet fever. The object of the experiment was to ascertain to what extent it is possible to influence directly the occurrence of complications and of secondary infections in the treatment of scarlet fever and indirectly the duration of stay of scarlet fever patients in hospital and the percentage of infective cases discharged.

The first ward was opened on April 14th, 1910, and the second on May 14th, 1910. Each ward contains 22 beds, and gives an allowance of about 2,000 cubic feet per bed. The period to which this report refers ended on December 31st, 1911.

DIAGRAM TO SHOW THE ARRANGEMENT OF THE
WARDS AND THE ORDER IN WHICH THE
BED-POSITIONS WERE OCCUPIED BY THE PATIENTS.



Ward equipment. — A copper steriliser (22 inches by 14 inches by 6 inches) was set up in each kitchen. Enamelled iron feeding utensils were used and were boiled after use. Six hand-basins in three pairs on easily running carriages were supplied to each ward. Each patient was supplied with the following articles in addition to his usual stock:—

- Bath and hand towel,
- Soap and soap dish,
- Washing bowl,
- Thermometer (kept in Izal, 1 in 40),
- Syringes and lotion bowl (if treatment required).

Each hair-dressing set (brush, comb and bag) was stamped with a number which was written on the patient's bed-card on admission in order to prevent interchange.

Treatment of patients.—With the exception that no cloaks were used in the wards, the patients were dealt with in a manner similar to that employed in an isolation or cubicle block. Medical officer and nurses were instructed to wash their hands after examining or attending to a patient. No attempt was made to use any disinfectant for this purpose except soap and water and nail-brush. All toys and books sent in for the patients were referred to the medical officer before they were handed over to the patients. No toys or books which were not new were allowed, and only such toys as could be tied to the bed were passed. Medical treatment was carried out in the usual way. Careful attention was given to the throat and nose and to the prevention and treatment of fissures and sores at the mucocutaneous junction in the nose and mouth.

Ward Management.—Each ward is conveniently divided into two sections by the fireplace on the one side and the lavatory door on the other. In the outer section, nearer to the corridor, there are six beds on

each side, and in the inner section there are five. The inner section was used for acute cases and the outer for the convalescent patients. A new arrival occupied the bed-position marked 1 on the diagram and made way for more recent arrivals by occupying the positions in the order in which they are marked. In this way the most acute cases were placed in the most convenient position for nursing and the most convalescent were kept at the greatest possible distance from the acute cases.

Convalescence and discharge.—In the absence of any contra-indication, the patient began to get up on the 7th day of normal temperature. It was recognised that the greatest difficulty would be encountered in dealing with the patients during their convalescence, and particularly when they had regained health but were not quite fit for discharge. An attempt was made to meet this difficulty by keeping the patients who were up by their bedsides when in the ward, and by maintaining a space between them greater than they were able to stretch over, when they were seated by the fireplace in cold weather or when they were at table at meals. All convalescents spent as much time as possible out of doors unless the weather was too inclement; and a trustworthy nurse was always in charge to keep them separate and to prevent the little friendly attentions which one patient is apt to show to another.

The patients were discharged from hospital under the same routine as has been employed in the Managers' hospitals during the last few years. The bath was given on the evening before discharge and the patient spent the last night of his stay in hospital in a ward set apart for discharged patients. In examining patients for discharge, no attention was paid to the presence of desquamation, except to ascertain that the hands were clear in order to avoid any conflict with inexperienced opinion. Attention was given to the condition of the throat and nasal passages, to the gums and teeth, to mucous discharges and septic sores and to the general physical condition of the patient.

The following statistical tables have been compiled in accordance with the method used in the annual report on the hospitals of the Board.

The number of cases to which the report refers is 403. Of these 6 died and 397 were discharged recovered. In addition there were 31 patients who occupied beds in the wards during part of their time in hospital. Of these 5 were transferred to the Southern Hospital on account of pressure on the accommodation here. The rest were sent to other wards in this hospital. Of the latter 17 were connected with the occurrence of super-added infection in the experimental wards and the remainder were removed on account of deficient evidence of scarlet fever or for administrative reasons.

Except for the fact that both wards are for female patients, no selection of patients for admission was made.

TABLE I.—*Patients divided according to age and sex. Deaths shown at each period.*

			Males.	Deaths.	Females.	Deaths.	Total.
Under	1 year	..	2	1	1	—	3
1	to 2 years	..	9	..	10	..	19
2	„ 3 „	..	13	1	24	..	37
3	„ 4 „	..	22	1	26	..	48
4	„ 5 „	..	18	..	39	..	57
5	„ 10 „	..	22	1	129	1	151
10	„ 15 „	..	..	..	54	..	54
15	„ 20 „	..	..	..	12	..	12
20	„ 25 „	..	..	..	10	..	10
25	„ 30 „	..	..	..	9	1	9
30	„ 35 „	..	..	..	2	..	2
35	„ 40 „	..	..	..	1	..	1
Totals			86	4	317	2	403

Recovered cases, 397.

Deaths, 6.

TABLE II.—*Day of residence on which patient was discharged*
(Recovered patients).

Number of patients.	Number of days residence.	Average day of discharge.
(a) 397 .	16,754	42.20

*Day of disease on which patient was discharged
(Recovered patients).*

(b)	397	17,938	45.18
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The figure 42·20 is to be compared with 47·7, the average residence of all scarlet fever patients in the South Eastern Hospital during 1911. With the exceptions already mentioned, no patients were transferred from the experimental wards to the convalescent hospitals, while over 50 per cent. of all scarlet fever patients treated in the hospital during 1911 were so dealt with. It seems reasonable to assume that this distinction acted to the disadvantage of the experimental wards in respect to the average period of detention.

TABLE III.—*Complications arising among the 403 patients treated.*

					Number of	Percentage	Percentage
					cases.	attacked.	attacked
							amongst
							all M.A.B.
							Hospitals,
							1910.
Rhinitis and rhinorrhœa	..	..	..	..	70	17·3	..
Otitis	..	..	..	..	34	8·4	12·64
Rheumatism	..	..	..	..	15	3·7	3·87
Nephritis	..	..	..	..	14	3·4	5·14
Albuminuria	..	..	..	..	19	4·7	8·53
Adenitis—							
(a) Primary suppurative	..	..	..	..	3	0·7	0·92
(b) Secondary	..	..	..	..	8	2·0	7·08
(c) Secondary suppurative	..	..	..	..	2	0·5	1·41
Tonsillitis of convalescence	..	..	..	..	7	1·7	..
Vaginitis	..	..	..	..	8	2·0	1·97
Septic foci, including whitlow, pustules,							
abscesses, etc.	..	..	..	..	17	4·2	..
Pneumonia and pleurisy	..	..	..	..	3	0·7	0·55
Endocarditis	..	..	..	..	3	0·7	0·92
Jaundice	..	..	..	..	3	0·7	0·41
Stomatitis	..	..	..	..	2	0·5	0·71

TABLE IV.—*Co-existent disease (retained in the ward).*

		Number of cases.
Scarlet fever and diphtheria	..	2
„ „ rubella	.. ..	1
Recurrence of scarlet fever	.. ..	4

The number of alleged infecting cases discharged home from the wards was 4. Of these 2 appeared to be true infecting cases. The third was associated with another patient discharged from one of the other hospitals. The interval for this hospital was ten days and for the other hospital four days. The fourth alleged infecting case was very thoroughly investigated on account of a claim for compensation and was rejected. On the highest estimate the percentage of infecting cases discharged was therefore 1·0 per cent., and on the lowest estimate 0·5 per cent. The corresponding figure for the South Eastern Hospital for the year 1910 was 3·3, and for 1911 was 2·4.

TABLE V.—*Invasions by other infections and their results.*(a) *Measles.*

Date of invasion.	Number of cases attacked.	
	At end of 1st incubation period.	At end of 2nd incubation period.
1. August 31st, 1910	0	..
2. January 28th, 1911.. ..	2	..
3. February 18th, 1911	1	1
4. April 10th, 1911	0	..

(b) *Varicella.*

	At end of 1st period.	At end of 2nd period.	At end of 3rd period.
1. October 18th, 1911	4	?	1
2. October 24th, 1911	0	..	..

(c) *Whooping cough.*

1. March 28th, 1911	0
2. May 4th, 1911	0

(d) *Rubella.*

1. May 29th, 1911	0
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10.—THE BLOOD-PRESSURE IN SCARLET FEVER.

By J. D. Rolleston, M.D., Assistant Medical Officer, Grove Hospital.

Historical note.—It is only within the last ten years that systematic observations on the blood-pressure in scarlet fever have been made with the sphygmomanometer, though the tension in postscarlatinal nephritis had been examined with the sphygmograph at a much earlier date by Galabin (1873), Mahomed (1874), Gresswell (1884), and Riegel (1884).

Neu (1902) found that the blood-pressure sank during the febrile period and rose again in convalescence. Kolossova (1902) on the other hand, found that a rise occurred during the eruptive period followed by a fall. Slatkow (1904) came to the same conclusion. Tscherepnin (1904) found that the highest blood-pressure was met with in the eruptive stage and that the tension fell parallel with the fever. In the third and fourth weeks a fresh maximum pressure might be observed, concurrently with the onset of nephritis, the blood-pressure falling again as the nephritis cleared up.

The above four observers all made use of Gärtner's tonometer.

Federn (1903) with von Basch's instrument found that in scarlet fever, as he had also observed in cholera and malaria, the pressure was abnormally raised, and that the severer the infection the higher was the pressure. He admitted, however, that further observations were required to confirm his work. These, it may be remarked, have not been made. In convalescence he found the blood-pressure returned to normal. Injection of Moser's serum was followed by an immediate fall, though no such result attended the injection of ordinary horse serum.

Weigert (1907) used Riva-Rocci's instrument in 64 cases, employing the broad armlet in 5 cases and the narrow armlet in 59 cases. He found that scarlet fever following a normal course had hardly any effect on the blood-pressure. At most the readings were 10 mm. higher in late convalescence than during the febrile stage and the first weeks of convalescence. The lowest record was frequently obtained in the first few days after the temperature had become normal, or in cases of protracted pyrexia, in the last few days of the febrile period. Cardiac disturbance was occasionally accompanied by a moderate rise of pressure. Abnormally high readings were recorded in a fatal case of acute nephritis (v. infra.).

Nobécourt and Tixier (1908) used Potain's instrument in 33 patients of both sexes whose ages ranged from two to 16 years. They found that as a rule the pressure sank from the beginning of the disease until the sixteenth day, but less frequently it remained stationary, and that in a few it rose. After the sixteenth day it usually rose again, but in a few cases it remained stationary. Change of diet, the character of the attack, and the occurrence of complications had no appreciable influence on the blood-pressure.

Teissier and Tanon (1908) examined 73 cases in adults between 19 and 25 years of age with Potain's instrument. 38 were males, 35 females. They found that the blood-pressure was more liable to sink in the scarlet fever of the adult than in that of the child. The fall was early, and might even be present in the pre-eruptive stage. As in children, the pressure did not appear to be influenced by the character of the diet, nor, with the exception of nephritis with massive albuminuria in which the tension rose, were complications associated with a rise of pressure. In mild cases the fall of pressure bore no relation to the temperature nor to the pulse frequency. In severe cases in which there was considerable hypotension the extent of the fall was related to the degree of pyrexia and tachycardia. Return of the pressure to the normal might be early or late, slow or rapid.

Since the appearance of Teissier and Tanon's paper no series of observations on the blood-pressure in scarlet fever has been published, but a few writers have drawn attention to the marked hypotension likely to occur in severe forms of the disease and have referred this symptom to acute suprarenal insufficiency on account of the concomitant symptoms and post-mortem findings. (Hutinel, Comby, Ribadeau-Dumas and P. Harvier).

Hutinel, Grysez and Dupuich have recorded cases where the administration of adrenalin has been followed by rapid rise of blood-pressure and disappearance of the other symptoms of suprarenal involvement. Pospischill, on the other hand, who like myself had found adrenalin of great value in diphtheria, has observed no benefit from its use in scarlet fever.

The present paper is based on observations made on 122 cases of scarlet fever with C. J. Martin's modification of Riva-Rocci's sphygmomanometer. As in my recent study of the blood-pressure in diphtheria, the systolic pressure as measured by the disappearance of the radial pulse, was alone taken into consideration. The measurements as far as possible were taken at the same time each day, between 2 and 3 p.m., *i.e.*, from 1½ to 2 hours after food.

Age and sex.—Table I. shows that the great majority of the patients were children. 79 were males, 43 females. As in diphtheria there was no appreciable difference in the blood-pressure of any two individuals of different sexes, but of the same ages and suffering from attacks of equal severity.

TABLE I.

Years.						Males.	Females.
2-3	..	..	..	..	..	0	1
3-4	..	..	..	..	..	1	1
4-5	..	..	..	..	..	5	3
5-6	..	..	..	..	..	3	2
6-7	..	..	..	..	..	9	6
7-8	..	..	..	..	..	9	3
8-9	..	..	..	..	..	6	7
9-10	..	..	..	..	..	7	5
10-11	..	..	..	..	..	6	6
11-12	..	..	..	..	..	5	0
12-13	..	..	..	..	..	6	3
13-14	..	..	..	..	..	2	2
14-15	..	..	..	..	..	3	0
15-34	..	..	..	..	..	17	4
						—	—
						79	43
						—	—

Classification of cases.—In 30 cases the blood-pressure was taken in convalescence only, during the occurrence of nephritis. The remaining 92 were classified according to the character of the initial attack into severe (14 cases), moderate (26 cases), and mild (52 cases).

The blood-pressure in scarlet fever.—As judged by the standard of Cook and Briggs, according to which the blood-pressure of children up to 2 years is 75–90 mm. Hg., of older children 90–110 mm. and of young adults 130 mm., 23 of the 92 cases or 25.0 per cent. showed for varying periods a pressure below the normal. The fall was most frequent and marked in the severe cases, among whom it occurred in 9 out of 14 cases or 64 per cent; in the moderate it was noticed in 7 or 26.3 per cent., and in the mild in 10 or 19.3 per cent.

Not only was the actual percentage of cases in this series showing a fall of blood-pressure decidedly less than that among my 179 cases of diphtheria in whom it was 35.1, but the degree and duration of the fall were also much less marked. Thus in only 7 did the fall below normal exceed 10 mm., ranging in these cases from 12–30 mm., and in only 7 did it exceed a week, the duration in these cases being from 8–12 days. None showed a persistent rise above the normal standard of blood-pressure. In the acute stages, however, supranormal readings were recorded in 16 cases.

On adopting Nobécourt and Tixier's plan of comparing the maximum pressure recorded during the first four days of the disease with the maximum pressure from the 30th to the 40th days, when the patient could be regarded as normal, the following results were obtained:—In 15 the blood-pressure was higher in convalescence than in the acute stage, in 37 it was lower, and in 25 it was the same at both periods.

From this it will be seen that in the majority of cases any change in the blood-pressure in scarlet fever was in a downward direction, in accordance with the general rule that febrile diseases tend to lower the blood-pressure.

Date of highest and lowest blood-pressure.—The following tables show the dates at which the highest and lowest blood-pressures were recorded. In the great majority the highest readings were obtained in the first week. There was also a preponderance of the lowest readings in the first week, though a large minority were found in the second week also.

TABLE II.—*Showing the number of cases in each week in which the highest readings were recorded.*

		1st week.	2nd week.	3rd week.	4th week.	5th week.	6th week.
Severe ..	..	11	1	0	1	0	1
Moderate ..	..	17	1	4	2	2	0
Mild ..	..	39	4	6	3	0	0
		67	6	10	6	2	1

TABLE III.—*Showing the number of cases in each week in which the lowest readings were recorded.*

		1st week.	2nd week.	3rd week.	4th week.	5th week.	6th week.	7th week.
Severe ..	..	6	6	0	1	0	1	0
Moderate ..	..	13	11	1	0	0	0	1
Mild ..	..	25	22	4	0	1	0	0
		44	39	5	1	1	1	1

In 28 cases (4 severe, 9 moderate, 15 mild) the highest and lowest readings were both observed in the first week, the differences between the two ranging from 10 to 40 mm.

The preponderance of the highest readings in the first week is to be attributed, as in diphtheria, partly to the febrile disturbance and partly to the excitement caused by the application of an unfamiliar instrument. In support of the last explanation is the fact that among 82 cases admitted during the first week of the disease in 59 the highest reading was the first taken. The difference between the highest and lowest records in a given case was naturally more marked in the severe than in the moderate, in the moderate than in the mild cases. Thus among the severe cases the greatest difference was 60 mm., and the average 27 mm., among the moderate the greatest difference was 32 mm., and the average 16 mm., and among the mild the greatest difference was 32 mm., and the average 13 mm.

The highest reading apart from nephritis occurred in a girl aged 15 years, convalescent from a severe attack, whose blood-pressure from the 49th to the 60th days ranged between 130 and 150 mm. The lowest reading in a case which recovered was 70 mm., which was registered on three occasions in a girl aged 6 years, convalescent from a mild attack. In none of the other cases which recovered did the blood-pressure fall below 80 mm.

After deducting three fatal cases and two in which the blood-pressure never reached normal again during the period of observation, the date at which the pressure returned to normal according to Cook and Briggs' standard is shown in Table IV., from which it is seen that in the great majority the normal tension was regained by the fourth week.

TABLE IV.

			1st week.	2nd week.	3rd week.	4th week.	5th week.
Severe	..	..	1	1	0	0	1
Moderate	..	..	0	2	1	2	1
Mild	..	..	0	1	4	3	0
			1	4	5	5	2

Relation of blood-pressure to pulse-rate.—The highest pulse-rates were invariably found in the first week and the lowest, as a rule, in the second and third weeks. The following table shows the exact figures in 85 cases.

TABLE V.—Showing weeks of highest and lowest pulse-rates.

			Highest pulse-rate.	Lowest pulse-rate.			
			1st week.	2nd week.	3rd week.	4th week.	
Severe	..	..	9	2	3	4	
Moderate	..	..	26	9	14	3	
Mild	..	..	50	38	11	1	
			85	49	28	8	

Comparative readings in the erect and recumbent positions.—The readings in the erect and recumbent positions in 95 patients in whom these comparative observations were made were as follows:—In 25 the readings were the same, in 21 the reading was higher in the recumbent than in the erect position, and in 49 higher in the erect than in the recumbent position, when the patient was first allowed to get up. Thus in 46 cases or 48·4 per cent. the reversal of the ordinary relations between the records in the two positions was found. This occurrence of the so-called hypotension of effort is liable to occur in convalescence from any acute disease, and has already been illustrated in my diphtheria cases,

among whom it was still more frequent, occurring in 80 out of 103 cases or 77.6 per cent.

In every case the normal relation was finally re-established before discharge from hospital.

Effect of complications on blood-pressure.—My own observations serve to confirm those made by Nobécourt and others (v. supra.) to the effect that with the exception of nephritis complications have little or no effect on the blood-pressure in scarlet fever.

Thus, among 11 cases of *rheumatism*, in 7 no change whatever was noted, and in 4 there was a transient rise varying from 2 to 16 mm.

With the onset of *cervical adenitis* in convalescence which occurred in 13 cases, in 8 there was no change, in 3 there was a rise of from 14 to 20 mm. and in 2 there was a fall of from 4 to 12 mm.

The occurrence of *otitis* in 7 cases was not accompanied by any change.

Endocarditis which was noted in 2 cases was associated with a slight rise in one case, and by none in the other.

Laryngitis, a terminal phenomenon in two cases, had a decidedly hypertensive action owing to the obstruction to respiration, the blood-pressure rising in two days in a girl aged 9 years from 90 to 120 m.m. In the other case, a girl aged 3 years, the blood-pressure rose in 24 hours from 90 to 110 mm.

Of 7 cases of *simple albuminuria* without other signs of nephritis 2 showed no rise, and 5 showed a rise ranging from 2 to 20 mm.

Nephritis.—Of 33 cases of nephritis only 12, the details of which are given in Table VII., showed any hypertension, and of these 3 had a supernormal reading only while the temperature was raised. Most of the 12 cases showed more or less marked oliguria and a relatively slow pulse.

TABLE VII.

Age.		Blood-pressure.	Pulse.	Ounces of urine in 24 hours.	Duration of hypertension.
4 years	..	116	136	11-16	1 day.
6	„	140-116	140	9-26	12 days.
7	„	120	68	40-50	1 „
8	„	120	72	30	2 „
9	„	130-120	52	8-28	7 „
9	„	150-120	144	35-37	3 „
10	„	120	72	21	1 „
10	„	130-120	72	11-27	10 „
10	„	120	64	1-28	4 „
10	„	126	72	20-45	7 „
11	„	120	68	14	1 „
12	„	120	80	32	1 „

In the remaining 21 patients whose ages ranged from 3 to 12 years the blood-pressure did not rise above 110 mm.

The absence of any rise of blood-pressure in many cases of postscarlatinal nephritis and the large number of cases in which only a slight rise was noted, are in keeping with the fact that scarlatinal nephritis as a rule is a benign affection, the great majority of such cases—six-sevenths according to Heubner's estimate—ending in complete recovery.

All my cases of nephritis recovered, and beyond drowsiness, occasional vomiting, and headache, no symptoms suggestive of uræmia were observed. On this account no remarkably high readings were noted. Beyond some puffiness of the face none showed any degree of œdema. The fatal cases of

scarlatinal nephritis as well as those with any considerable degree of œdema are usually cases in which the initial disease has been overlooked and the renal lesions have been neglected until irreparable damage has been done. Weigert relates such a case in a boy, aged 6 years, admitted to hospital with postscarlatinal nephritis at the end of the third week. The blood-pressure on admission was 240 mm., and two days later 170 mm., a few hours before death. Hutinel also mentions a case with a pressure of 190 mm., accompanied by convulsive attacks which disappeared as the pressure fell.

My own observations thus concord more with those of Buttermann, Carter and Shaw, who in many cases of acute nephritis found no appreciable rise of pressure than with those of Riegel who stated that hypertension in scarlet fever was almost invariable.

It is of historical interest that Mahomed in 1873 distinguished a scarlatinal nephritis with a rise of arterial tension from scarlatinal nephritis without a rise, the former being due in his opinion to constipation and the latter to chill. His views, however, did not receive confirmation from subsequent writers. Astley Gresswell in his well-known monograph on scarlet fever contested this ætiology, and pointed out that it was impossible to distinguish these cases, rightly affirming that in scarlatinal nephritis there might be very marked tension or no more than occurs in health and almost every intermediate grade.

Prognostic value of sphygmomanometry in scarlet fever.—The early fatal cases showed a rapid fall of blood-pressure which was even more marked than in diphtheria, but it cannot be said that the use of the sphygmomanometer in the acute stage of scarlet fever any more than in that of any other acute disease with the exception of pneumonia affords information that is not given by the ordinary methods of examination. From a practical point of view its value is greater in the examination of cases of postscarlatinal nephritis in which, *ceteris paribus*, a higher reading indicates a greater damage to the kidney. The preservation of such records would be specially valuable to the family practitioner who has charge of the same individual during a number of years in enabling him to estimate the extent of the renal lesion and to direct his manner of life accordingly.

Adrenalin therapy in scarlet fever.—Hypotension, being neither so frequent nor as a rule so marked as in diphtheria, the exhibition of adrenalin is seldom required in scarlet fever. In the present cases the drug was not employed. In view, however, of the encouraging results already alluded to, obtained by Hutinel and others, it is indicated in cases showing symptoms of acute suprarenal insufficiency. In many cases the suprarenal lesions are doubtless slight and transitory, but in a case of malignant scarlatina recorded by Comby in which the symptoms were repeated vomiting, diffuse abdominal pain, foetid diarrhœa, and arterial hypotension, the necropsy showed complete destruction of the suprarenals by hæmorrhage. In such a case opotherapy like any other treatment is unavailing, but as the diagnosis of suprarenal hæmorrhage in the course of infectious disease cannot be made with certainty during life, signs of suprarenal involvement, especially pronounced hypotension, should be met with by the administration of adrenalin or suprarenal extract.

SUMMARY.

1. In a series of cases of scarlet fever the blood-pressure was found to be subnormal in 25 per cent., the extent and duration of the depression being as a rule in direct relation to the severity of the initial attack.

2. In the great majority the highest readings were found in the first week; there was also a predominance of the lowest readings in the same week, but in a large minority the lowest readings were found in the second week. The normal tension was usually re-established by the fourth week.

3. In the majority of cases the blood-pressure was lower in convalescence than in the acute stage.

4. In 48.4 per cent. of the convalescent cases the readings in the recumbent and erect positions were the same, or the recumbent was higher than the vertical record until convalescence was firmly established (hypotension of effort).

5. With the exception of nephritis complications had little, if any, effect upon the blood-pressure.

6. In only a minority of the nephritis cases—12 out of 33—was the blood-pressure above normal, and the hypertension was never extreme nor of long duration.

7. Sphygmomanometry in scarlet fever, as in most of the other acute diseases, is of little practical importance in the acute stage, but in convalescence may give some indication of the severity of the renal lesion which may be of value in subsequent treatment of the patient.

8. Pronounced arterial hypotension, especially if accompanied by other signs of acute suprarenal insufficiency, should be treated by adrenalin or suprarenal extract.

REFERENCES.

1. Buttermann, *Deut. Arch. f. klin. Med.*, 1902, lxxiv., p. 1.
2. Carter, H. S., *Am. Jour. Med. Sci.*, 1901, cxxii., p. 854.
3. Comby, J., *Bull. et Mém. Soc. Méd. Hôp. de Paris*, 1910, xxix., p. 689.
4. Federn, H., *Wien. Klinik*, 1903, xxix., p. 259 ; *Wien. klin. Woch.*, 1903, xvi., p. 608 ; *Verhandl. des Kong. f. inn. Med.*, 1904, xxi., p. 576.
5. Galabin, A. L. *On the connection of Bright's disease with changes in the vascular system.* London, 1873.
6. Gresswell, D. A. *Contribution to the Natural History of Scarlatina derived from observations of the London epidemic of 1887-1888.* Oxford 1890.
7. Grysez and Dupuich, *Bull. et Mém. Soc. Méd. Hôp. de Paris*, 1912, xxxiii., p. 61.
8. Hutinel, V., *Mal. des Enf.*, 1909, i., p. 356 ; *Jour. des Pratic.*, 1909, xxiii., p. 146.
9. Janeway, T. C. *Clinical Study of Blood-pressure.* London, 1904.
10. Kolossova, quoted by Weigert, loc. cit.
11. Mahomed, F. A., *Med.-Chir. Trans.*, 1874, lvii., p. 196.
12. Neu, quoted by Weigert, loc. cit.
13. Nobécourt, P., and Tixier, L., *Bull. Soc. Péd. de Paris*, 1908, x., p. 102, and *Jour. de Physiol. et de Path. gén.*, 1908, x., p. 495.
14. Pospischill, D., and Weiss, S. *Ueber Scharlach.* Berlin, 1911, p. 143.
15. Ribadeau-Dumas, L., and Harvier, P., *Bull. et Mém. Soc. Méd. Hôp. de Paris*, 1912, xxxiii., p. 28.
16. Riegel, *Berlin. klin. Woch.*, 1882, xix., p. 345 ; *Zeitschr. f. klin. Med.*, 1884, vii., p. 260.
17. Rolleston, J. D., *M.A.B. Reports*, 1910, *Med. Supplement*, p. 267.
18. Shaw, quoted by Janeway, loc. cit.
19. Slatkow, quoted by Weigert, loc. cit.
20. Teissier and Tanon, *Jour. de Physiol. et de Path. gén.*, 1908, x., p. 481.
21. Tscherepnin, S. N., *St. Petersburg. Med. Woch.*, 1904, xxix., Beilage, p. 54.
22. Weigert, K., *Samml. klin. Vortr.*, No. 459 (Série xvi., Heft 9), *Innere Med.* No. 138.

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